

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 3/12/2008

TIME: 17:57

updated 9/16/03

ANSWERED:		<input checked="" type="checkbox"/> Lab	<input checked="" type="checkbox"/> Safety	<input checked="" type="checkbox"/> Guard
Name of person calling: Darrell Wright			Was 333 called?	Yes
Nature of emergency	Accident		Number of people injured	
	Explosion		Contained	<input checked="" type="checkbox"/> Fully
	Fire			Amount not contained
	<input checked="" type="checkbox"/> Release	150		Amount/ Gal
Detailed Comments: Sulfuric acid spill at North Sulfuric				
Area of emergency				
Pond	Granulation	Phos Maint.	East Sulfuric	
NH3 Sphere	DCS,PPA	Product Ship.	West Sulfuric	
Front Office	E & I	Rollover	Ware House	
Ball Mill	Maint. Shop	Rubber Shop	Wash Plant	
Calciners	Mobile Shop	Silica	Washed Reclaim	
Compressor	NE Maint.	SPA Filter	B Bed shack	
Chem. Bldg.	Phos Acid	<input checked="" type="checkbox"/> North Sulfuric	Lab	
Check phone list for phone number in area.				
Nature of injuries	<input checked="" type="checkbox"/> None	Thermal burn	Laceration	
	Fall	Chem. Burn	Other	
Area of body affected	Eyes	Arms	Back	
	Face & Head	Hands	Legs	
	Neck	Chest	Feet	
Do we Need?	Ambulance	Evacuation	Emergency Responce Team	
	Other	<input checked="" type="checkbox"/> None		
Wind MPH 5 Direction SW				
direction & Speed				
Cross out area that the wind is coming from. This will tell where to send the people to.				
Send to Zone No wind send to Zone 3				
Filled out by: Tony Wuthrich				
Visual check: South to North				

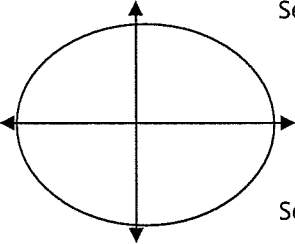
EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 3/24/2008

TIME: 1550

updated 9/16/03

ANSWERED:		<input checked="" type="checkbox"/> Lab	<input checked="" type="checkbox"/> Safety	<input checked="" type="checkbox"/> Guard
Name of person calling: Dan Wilde			Was 333 called? Yes	
Nature of emergency	Accident		Number of people injured	
	Explosion		Contained	Fully
	Fire			Amount not contained
	<input checked="" type="checkbox"/> Release	0.5		Amount/ Gal
Detailed Comments: 93% sulfuric acid leak at East Sulfuric				
Area of emergency				
Pond	Granulation	Phos Maint.	<input checked="" type="checkbox"/> East Sulfuric	
NH3 Sphere	DCS,PPA	Product Ship.	West Sulfuric	
Front Office	E & I	Rollover	Ware House	
Ball Mill	Maint. Shop	Rubber Shop	Wash Plant	
Calciners	Mobile Shop	Silica	Washed Reclaim	
Compressor	NE Maint.	SPA Filter	B Bed shack	
Chem. Bldg.	Phos Acid	North Sulfuric	Lab	
Check phone list for phone number in area.				
Nature of injuries	None		Thermal burn	Laceration
	Fall	<input checked="" type="checkbox"/> Chem. Burn	Other	
Area of body affected	Eyes		Arms	Back
	<input checked="" type="checkbox"/> Face & Head	Hands	Legs	
	Neck	Chest	Feet	
Do we Need?	Ambulance		Evacuation	Emergency Responce Team
	Other		<input checked="" type="checkbox"/> None	
Wind direction & Speed		<div style="text-align: center;"> <p>0 North</p> <p>Send to Zone 4 Send to Zone 1</p>  <p>270 West 90 East</p> <p>Send to Zone 3 Send to Zone 2</p> <p>180 South</p> </div>		
MPH 10 Direction S				
Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3				
Filled out by: Daren Maughan				
Visual check: South to North				

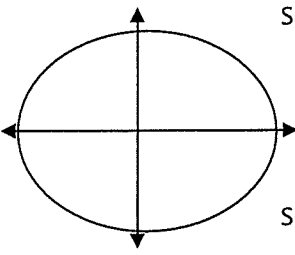
EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 4/3/2008

TIME: 12:33

updated 9/16/03

ANSWERED:		<input checked="" type="checkbox"/> <i>Lab</i>	<i>Safety</i>	<input checked="" type="checkbox"/> <i>Guard</i>
Name of person calling: Shane Passey			Was 333 called? Yes	
Nature of emergency	<i>Accident</i>		<i>Number of people injured</i>	
	<i>Explosion</i>		Contained	<input checked="" type="checkbox"/> <i>Fully</i>
	<i>Fire</i>			<i>Amount not contained</i>
	<input checked="" type="checkbox"/> <i>Release</i>	2		<i>Amount/ Gal</i>
Detailed Comments: Spilled 2 gallons of sulfuric acid from a leaking pipe.				
Area of emergency				
<i>Pond</i>	<i>Granulation</i>	<i>Phos Maint.</i>	<input checked="" type="checkbox"/> <i>East Sulfuric</i>	
<i>NH3 Sphere</i>	<i>DCS,PPA</i>	<i>Product Ship.</i>	<i>West Sulfuric</i>	
<i>Front Office</i>	<i>E & I</i>	<i>Rollover</i>	<i>Ware House</i>	
<i>Ball Mill</i>	<i>Maint. Shop</i>	<i>Rubber Shop</i>	<i>Wash Plant</i>	
<i>Calciners</i>	<i>Mobile Shop</i>	<i>Silica</i>	<i>Washed Reclaim</i>	
<i>Compressor</i>	<i>NE Maint.</i>	<i>SPA Filter</i>	<i>B Bed shack</i>	
<i>Chem. Bldg.</i>	<i>Phos Acid</i>	<i>North Sulfuric</i>	<i>Lab</i>	
Check phone list for phone number in area.				
Nature of injuries	<input checked="" type="checkbox"/> <i>None</i>	<i>Thermal burn</i>	<i>Laceration</i>	
	<i>Fall</i>	<i>Chem. Burn</i>	<i>Other</i>	
Area of body affected	<i>Eyes</i>	<i>Arms</i>	<i>Back</i>	
	<i>Face & Head</i>	<i>Hands</i>	<i>Legs</i>	
	<i>Neck</i>	<i>Chest</i>	<i>Feet</i>	
Do we Need?	<i>Ambulance</i>	<i>Evacuation</i>	<i>Emergency Responce Team</i>	
	<i>Other</i>	<input checked="" type="checkbox"/> <i>None</i>		
Wind <i>MPH</i> 0 <i>Direction</i>		<div style="text-align: center;"> <p>0 North</p> <p>Send to Zone 4 Send to Zone 1</p>  <p>270 West 90 East</p> <p>Send to Zone 3 Send to Zone 2</p> <p>180 South</p> </div>		
direction & Speed				
Cross out area that the wind is coming from. This will tell where to send the people to.				
Send to Zone 3 No wind send to Zone 3				
Filled out by: Steve Moore				
Visual check:				

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 4/23/2008

TIME: 12:54

updated 9/16/03

ANSWERED:		<input checked="" type="checkbox"/> Lab	<input type="checkbox"/> Safety	<input checked="" type="checkbox"/> Guard
Name of person calling: Jim Sippola			Was 333 called?	Yes
Nature of emergency	Accident		Number of people injured	
	Explosion		Contained	<input checked="" type="checkbox"/> Fully
	Fire			Amount not contained
	<input checked="" type="checkbox"/> Release	1		Amount/ Gal
Detailed Comments: Spilled 1 gallon of phosphoric acid				
Area of emergency				
Pond	Granulation	Phos Maint.	East Sulfuric	
NH3 Sphere	<input checked="" type="checkbox"/> DCS,PPA	Product Ship.	West Sulfuric	
Front Office	E & I	Rollover	Ware House	
Ball Mill	Maint. Shop	Rubber Shop	Wash Plant	
Calciners	Mobile Shop	Silica	Washed Reclaim	
Compressor	NE Maint.	SPA Filter	B Bed shack	
Chem. Bldg.	Phos Acid	North Sulfuric	Lab	
Check phone list for phone number in area.				
Nature of injuries	<input checked="" type="checkbox"/> None	Thermal burn	Laceration	
	Fall	Chem. Burn	Other	
Area of body affected	Eyes	Arms	Back	
	Face & Head	Hands	Legs	
	Neck	Chest	Feet	
Do we Need?	Ambulance	Evacuation	Emergency Responce Team	
	Other	<input checked="" type="checkbox"/> None		
Wind direction & Speed		<div style="text-align: center;"> <p>0 North</p> <p>Send to Zone 4 Send to Zone 1</p> <p>270 West 90 East</p> <p>Send to Zone 3 Send to Zone 2</p> <p>180 South</p> </div>		
MPH 3 Direction south				
Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3				
Filled out by: Steve Moore				
Visual check: South to North				

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 4/30/2008

TIME: 633

updated 9/16/03

ANSWERED:		<input checked="" type="checkbox"/> Lab	<input checked="" type="checkbox"/> Safety	<input checked="" type="checkbox"/> Guard
Name of person calling: Cody Muir			Was 333 called? Yes	
Nature of emergency	Accident		Number of people injured	
	Explosion		Fully	
	Fire		Amount not contained	
	<input checked="" type="checkbox"/> Release	2000	Amount/ Gal	<input checked="" type="checkbox"/> Partially
Detailed Comments: Gyp & Pond water release @ NW corner of filter building				
Area of emergency				
Pond	Granulation	Phos Maint.	East Sulfuric	
NH3 Sphere	DCS,PPA	Product Ship.	West Sulfuric	
Front Office	E & I	Rollover	Ware House	
Ball Mill	Maint. Shop	Rubber Shop	Wash Plant	
Calciners	Mobile Shop	Silica	Washed Reclaim	
Compressor	NE Maint.	SPA Filter	B Bed shack	
Chem. Bldg.	<input checked="" type="checkbox"/> Phos Acid	North Sulfuric	Lab	
Check phone list for phone number in area.				
Nature of injuries	<input checked="" type="checkbox"/> None	Thermal burn	Laceration	
	Fall	Chem. Burn	Other	
Area of body affected	Eyes	Arms	Back	
	Face & Head	Hands	Legs	
	Neck	Chest	Feet	
Do we Need?	Ambulance	Evacuation	Emergency Response Team	
	Other	<input checked="" type="checkbox"/> None		
Wind direction & Speed		<div style="text-align: center;"> <p>0 North</p> <p>180 South</p> </div>		
MPH 3	Direction East			
Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3				
Filled out by: J Kennedy				
Visual check: East to West				

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 5/1/2008

TIME: 14:45

updated 9/16/03

ANSWERED:		<input checked="" type="checkbox"/> Lab	<input type="checkbox"/> Safety	<input checked="" type="checkbox"/> Guard
Name of person calling: Brett Shaffer			Was 333 called?	Yes
Nature of emergency	Accident		Number of people injured	
	Explosion		Contained	Fully
	Fire			Amount not contained ALL
	<input checked="" type="checkbox"/> Release	50		Amount/ Gal
Detailed Comments: Low pH water @ Northend of granulation				
Area of emergency				
Pond	<input checked="" type="checkbox"/> Granulation	Phos Maint.	East Sulfuric	
NH3 Sphere	DCS,PPA	Product Ship.	West Sulfuric	
Front Office	E & I	Rollover	Ware House	
Ball Mill	Maint. Shop	Rubber Shop	Wash Plant	
Calciners	Mobile Shop	Silica	Washed Reclaim	
Compressor	NE Maint.	SPA Filter	B Bed shack	
Chem. Bldg.	Phos Acid	North Sulfuric	Lab	
Check phone list for phone number in area.				
Nature of injuries	<input checked="" type="checkbox"/> None	Thermal burn	Laceration	
	Fall	Chem. Burn	Other	
Area of body affected	Eyes	Arms	Back	
	Face & Head	Hands	Legs	
	Neck	Chest	Feet	
Do we Need?	Ambulance	Evacuation	Emergency Responce Team	
	Other	<input checked="" type="checkbox"/> None		
Wind direction & Speed				
MPH 12	Direction NW			
Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3				
Filled out by: J Kennedy				
Visual check: North to South				

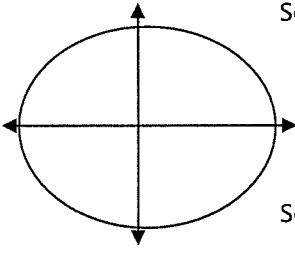
EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 5/1/2008

TIME: 12:53

updated 9/16/03

ANSWERED:		<input checked="" type="checkbox"/> <i>Lab</i>	<i>Safety</i>	<input checked="" type="checkbox"/> <i>Guard</i>
Name of person calling: Mike Perkins			Was 333 called?	Yes
Nature of emergency	<i>Accident</i>		<i>Number of people injured</i>	
	<i>Explosion</i>		<i>Contained</i>	<input checked="" type="checkbox"/> <i>Fully</i>
	<i>Fire</i>			<i>Amount not contained</i>
	<input checked="" type="checkbox"/> <i>Release</i>	30		<i>Amount/ Gal</i>
Detailed Comments: Spilled 30 gallons of 30% phosphoric acid				
Area of emergency				
<i>Pond</i>	<i>Granulation</i>	<i>Phos Maint.</i>	<i>East Sulfuric</i>	
<i>NH3 Sphere</i>	<i>DCS,PPA</i>	<i>Product Ship.</i>	<i>West Sulfuric</i>	
<i>Front Office</i>	<i>E & I</i>	<i>Rollover</i>	<i>Ware House</i>	
<i>Ball Mill</i>	<i>Maint. Shop</i>	<i>Rubber Shop</i>	<i>Wash Plant</i>	
<i>Calciners</i>	<i>Mobile Shop</i>	<i>Silica</i>	<i>Washed Reclaim</i>	
<i>Compressor</i>	<i>NE Maint.</i>	<i>SPA Filter</i>	<i>B Bed shack</i>	
<i>Chem. Bldg.</i>	<input checked="" type="checkbox"/> <i>Phos Acid</i>	<i>North Sulfuric</i>	<i>Lab</i>	
Check phone list for phone number in area.				
Nature of injuries	<input checked="" type="checkbox"/> <i>None</i>	<i>Thermal burn</i>	<i>Laceration</i>	
	<i>Fall</i>	<i>Chem. Burn</i>	<i>Other</i>	
Area of body affected	<i>Eyes</i>	<i>Arms</i>	<i>Back</i>	
	<i>Face & Head</i>	<i>Hands</i>	<i>Legs</i>	
	<i>Neck</i>	<i>Chest</i>	<i>Feet</i>	
Do we Need?	<i>Ambulance</i>	<i>Evacuation</i>	<i>Emergency Responce Team</i>	
	<i>Other</i>	<input checked="" type="checkbox"/> <i>None</i>		
Wind <i>MPH</i> 14 <i>Direction</i> North		<div style="text-align: center;"> <p>0 North</p> <p>Send to Zone 4</p> <p>Send to Zone 1</p> <p>270 West</p> <p>90 East</p> <p>Send to Zone 3</p> <p>Send to Zone 2</p> <p>180 South</p>  </div>		
direction & Speed				
Cross out area that the wind is coming from. This will tell where to send the people to.				
Send to Zone <i>No wind send to Zone 3</i>				
Filled out by: Steve Moore				
Visual check: North to South				

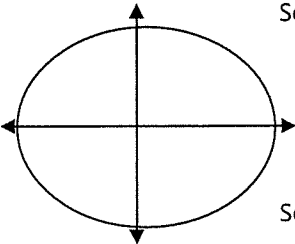
EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 5/8/2008

TIME: 1715

updated 9/16/03

ANSWERED:		<input checked="" type="checkbox"/> Lab	<input type="checkbox"/> Safety	<input checked="" type="checkbox"/> Guard
Name of person calling: Jim Sipola			Was 333 called?	Yes
Nature of emergency	Accident		Number of people injured	
	Explosion		Contained	Fully
	Fire			Amount not contained
	<input checked="" type="checkbox"/> Release	5		Amount/ Gal
Detailed Comments:		30% Phos acid leak at PPA plant		
Area of emergency				
Pond	Granulation	Phos Maint.	East Sulfuric	
NH3 Sphere <input checked="" type="checkbox"/>	DCS,PPA	Product Ship.	West Sulfuric	
Front Office	E & I	Rollover	Ware House	
Ball Mill	Maint. Shop	Rubber Shop	Wash Plant	
Calciners	Mobile Shop	Silica	Washed Reclaim	
Compressor	NE Maint.	SPA Filter	B Bed shack	
Chem. Bldg.	Phos Acid	North Sulfuric	Lab	
Check phone list for phone number in area.				
Nature of injuries	<input checked="" type="checkbox"/> None	Thermal burn	Laceration	
	Fall	Chem. Burn	Other	
Area of body affected	Eyes	Arms	Back	
	Face & Head	Hands	Legs	
	Neck	Chest	Feet	
Do we Need?	Ambulance	Evacuation	Emergency Responce Team	
	Other	<input checked="" type="checkbox"/> None		
Wind direction & Speed		<div style="text-align: center;"> <p>0 North</p> <p>Send to Zone 4 Send to Zone 1</p>  <p>270 West 90 East</p> <p>Send to Zone 3 Send to Zone 2</p> <p>180 South</p> </div>		
MPH 11 Direction West				
<p>Cross out area that the wind is coming from.</p> <p>This will tell where to send the people to.</p> <p>Send to Zone No wind send to Zone 3</p>				
Filled out by: Daren Maughan				
Visual check: West to North				

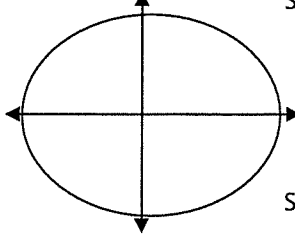
EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 5/13/2008

TIME: 1655

updated 9/16/03

ANSWERED:		X	<i>Lab</i>	X	<i>Safety</i>	X	<i>Guard</i>																												
Name of person calling: Mike Perkins					Was 333 called?		Yes																												
Nature of emergency		<i>Accident</i> <i>Explosion</i> <i>Fire</i>		Number of people injured <div style="border: 1px solid black; padding: 2px;"> X <i>Fully</i> </div>																															
		X	<i>Release</i>	20	<i>Amount/ Gal</i>	<div style="border: 1px solid black; padding: 2px;"> <i>Amount not contained</i> </div>	<i>Partially</i>																												
Detailed Comments: >30 % acid spill @ filter building																																			
Area of emergency <table border="0" style="width: 100%;"> <tr> <td><i>Pond</i></td> <td><i>Granulation</i></td> <td><i>Phos Maint.</i></td> <td><i>East Sulfuric</i></td> </tr> <tr> <td><i>NH3 Sphere</i></td> <td><i>DCS,PPA</i></td> <td><i>Product Ship.</i></td> <td><i>West Sulfuric</i></td> </tr> <tr> <td><i>Front Office</i></td> <td><i>E & I</i></td> <td><i>Rollover</i></td> <td><i>Ware House</i></td> </tr> <tr> <td><i>Ball Mill</i></td> <td><i>Maint. Shop</i></td> <td><i>Rubber Shop</i></td> <td><i>Wash Plant</i></td> </tr> <tr> <td><i>Calciners</i></td> <td><i>Mobile Shop</i></td> <td><i>Silica</i></td> <td><i>Washed Reclaim</i></td> </tr> <tr> <td><i>Compressor</i></td> <td><i>NE Maint.</i></td> <td><i>SPA Filter</i></td> <td><i>B Bed shack</i></td> </tr> <tr> <td><i>Chem. Bldg.</i></td> <td>X <i>Phos Acid</i></td> <td><i>North Sulfuric</i></td> <td><i>Lab</i></td> </tr> </table>								<i>Pond</i>	<i>Granulation</i>	<i>Phos Maint.</i>	<i>East Sulfuric</i>	<i>NH3 Sphere</i>	<i>DCS,PPA</i>	<i>Product Ship.</i>	<i>West Sulfuric</i>	<i>Front Office</i>	<i>E & I</i>	<i>Rollover</i>	<i>Ware House</i>	<i>Ball Mill</i>	<i>Maint. Shop</i>	<i>Rubber Shop</i>	<i>Wash Plant</i>	<i>Calciners</i>	<i>Mobile Shop</i>	<i>Silica</i>	<i>Washed Reclaim</i>	<i>Compressor</i>	<i>NE Maint.</i>	<i>SPA Filter</i>	<i>B Bed shack</i>	<i>Chem. Bldg.</i>	X <i>Phos Acid</i>	<i>North Sulfuric</i>	<i>Lab</i>
<i>Pond</i>	<i>Granulation</i>	<i>Phos Maint.</i>	<i>East Sulfuric</i>																																
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<i>Chem. Bldg.</i>	X <i>Phos Acid</i>	<i>North Sulfuric</i>	<i>Lab</i>																																
Check phone list for phone number in area.																																			
Nature of injuries		X	<i>None</i>	<i>Thermal burn</i>	<i>Laceration</i>																														
			<i>Fall</i>	<i>Chem. Burn</i>	<i>Other</i>																														
Area of body affected		<i>Eyes</i>		<i>Arms</i>	<i>Back</i>																														
		<i>Face & Head</i>		<i>Hands</i>	<i>Legs</i>																														
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Do we Need?		<i>Ambulance</i>		<i>Evacuation</i>	<i>Emergency Responce Team</i>																														
		<i>Other</i>		X	<i>None</i>																														
Wind direction & Speed <i>MPH</i> 3 <i>Direction</i> W Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3				<div style="text-align: center;"> 0 North Send to Zone 4 Send to Zone 1 270 West 90 East Send to Zone 3 Send to Zone 2 180 South </div> 																															
Filled out by: J Kennedy																																			
Visual check: West to North																																			

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 5/19/2008

TIME: 8:15

updated 9/16/03

ANSWERED:		<input checked="" type="checkbox"/> <i>Lab</i>	<input checked="" type="checkbox"/> <i>Safety</i>	<input checked="" type="checkbox"/> <i>Guard</i>
Name of person calling: Clare Christensen			Was 333 called?	Yes
Nature of emergency	<i>Accident</i>		<i>Number of people injured</i>	
	<i>Explosion</i>		<i>Contained</i>	<input checked="" type="checkbox"/> <i>Fully</i>
	<i>Fire</i>			<i>Amount not contained</i>
	<input checked="" type="checkbox"/> <i>Release</i>	450	<i>Amount/ Gal</i>	<i>Partially</i>
Detailed Comments: Spilled 450 gal. of SPA near the oxidation reactor on 5/16/08 @ 01:23				
Area of emergency				
<i>Pond</i>	<i>Granulation</i>	<i>Phos Maint.</i>	<i>East Sulfuric</i>	
<i>NH3 Sphere</i>	<i>DCS,PPA</i>	<i>Product Ship.</i>	<i>West Sulfuric</i>	
<i>Front Office</i>	<i>E & I</i>	<i>Rollover</i>	<i>Ware House</i>	
<i>Ball Mill</i>	<i>Maint. Shop</i>	<i>Rubber Shop</i>	<i>Wash Plant</i>	
<i>Calciners</i>	<i>Mobile Shop</i>	<i>Silica</i>	<i>Washed Reclaim</i>	
<i>Compressor</i>	<i>NE Maint.</i>	<i>SPA Filter</i>	<i>B Bed shack</i>	
<i>Chem. Bldg.</i>	<input checked="" type="checkbox"/> <i>Phos Acid</i>	<i>North Sulfuric</i>	<i>Lab</i>	
Check phone list for phone number in area.				
Nature of injuries	<input checked="" type="checkbox"/> <i>None</i>	<i>Thermal burn</i>	<i>Laceration</i>	
	<i>Fall</i>	<i>Chem. Burn</i>	<i>Other</i>	
Area of body affected	<i>Eyes</i>	<i>Arms</i>	<i>Back</i>	
	<i>Face & Head</i>	<i>Hands</i>	<i>Legs</i>	
	<i>Neck</i>	<i>Chest</i>	<i>Feet</i>	
Do we Need?	<i>Ambulance</i>	<i>Evacuation</i>	<i>Emergency Responce Team</i>	
	<i>Other</i>	<input checked="" type="checkbox"/> <i>None</i>		
Wind direction & Speed		<div style="text-align: center;"> <p>0 North</p> <p>Send to Zone 4 Send to Zone 1</p> <p>270 West 90 East</p> <p>Send to Zone 3 Send to Zone 2</p> <p>180 South</p> </div>		
Cross out area that the wind is coming from.				
This will tell where to send the people to.				
Send to Zone No wind send to Zone 3				
Filled out by: Steve Moore				
Visual check:				

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 5/19/2008

TIME: 14:47

updated 9/16/03

ANSWERED:		<input checked="" type="checkbox"/> Lab	<input type="checkbox"/> Safety	<input checked="" type="checkbox"/> Guard
Name of person calling: Dan Wilde			Was 333 called? Yes	
Nature of emergency	Accident		Number of people injured	
	Explosion		Contained	Fully
	Fire			Amount not contained
	<input checked="" type="checkbox"/> Release	5		Amount/ Gal
Detailed Comments: A sulfuric line at the North Plant is leaking. 5 gal. of acid spilled.				
Area of emergency				
Pond	Granulation	Phos Maint.	East Sulfuric	
NH3 Sphere	DCS,PPA	Product Ship.	West Sulfuric	
Front Office	E & I	Rollover	Ware House	
Ball Mill	Maint. Shop	Rubber Shop	Wash Plant	
Calciners	Mobile Shop	Silica	Washed Reclaim	
Compressor	NE Maint.	SPA Filter	B Bed shack	
Chem. Bldg.	Phos Acid	<input checked="" type="checkbox"/> North Sulfuric	Lab	
Check phone list for phone number in area.				
Nature of injuries	<input checked="" type="checkbox"/> None	Thermal burn	Laceration	
	Fall	Chem. Burn	Other	
Area of body affected	Eyes	Arms	Back	
	Face & Head	Hands	Legs	
	Neck	Chest	Feet	
Do we Need?	Ambulance	Evacuation	Emergency Responce Team	
	Other	<input checked="" type="checkbox"/> None		
Wind direction & Speed				
Wind MPH	10			
Direction south				
Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3				
Filled out by: Steve Moore		Send to Zone 4 Send to Zone 3 Send to Zone 1 Send to Zone 2		
Visual check: South to North				

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 5/28/2008

TIME: 8:45

updated 9/16/03

ANSWERED:		<input checked="" type="checkbox"/> Lab	<input checked="" type="checkbox"/> Safety	<input checked="" type="checkbox"/> Guard
Name of person calling: Todd Passy			Was 333 called?	Yes
Nature of emergency	Accident		Number of people injured	
	Explosion		Contained	<input checked="" type="checkbox"/> Fully
	Fire			Amount not contained
	<input checked="" type="checkbox"/> Release	10 Gal		Amount/ Gal
Detailed Comments: Tk 26 Spill				
Area of emergency				
Pond	Granulation	Phos Maint.	East Sulfuric	
NH3 Sphere	DCS,PPA	Product Ship.	West Sulfuric	
Front Office	E & I	Rollover	Ware House	
Ball Mill	Maint. Shop	Rubber Shop	Wash Plant	
Calciners	Mobile Shop	Silica	Washed Reclaim	
Compressor	NE Maint.	<input checked="" type="checkbox"/> SPA Filter	B Bed shack	
Chem. Bldg.	Phos Acid	North Sulfuric	Lab	
Check phone list for phone number in area.				
Nature of injuries	<input checked="" type="checkbox"/> None	Thermal burn	Laceration	
	Fall	Chem. Burn	Other	
Area of body affected	Eyes	Arms	Back	
	Face & Head	Hands	Legs	
	Neck	Chest	Feet	
Do we Need?	Ambulance	Evacuation	Emergency Responce Team	
	Other	<input checked="" type="checkbox"/> None		
Wind direction & Speed		<div style="text-align: center;"> <p>0 North</p> <p>270 West</p> <p>90 East</p> <p>180 South</p> </div>		
MPH 14 Direction SE				
Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3				
Filled out by: J Kennedy				
Visual check: South to North				

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 5/29/2008

TIME: 530

updated 9/16/03

ANSWERED:		X	Lab	Safety	X	Guard
Name of person calling: Dirk Stuki				Was 333 called?		Yes
Nature of emergency	Accident		Number of people injured			
	Explosion		Fully			
	Fire		Amount not contained			
	X	Release	30	Amount/ Gal	30	X Partially
Detailed Comments: Tank 26 acid leak at SPA						
Area of emergency						
Pond	Granulation	Phos Maint.	East Sulfuric			
NH3 Sphere	DCS,PPA	Product Ship.	West Sulfuric			
Front Office	E & I	Rollover	Ware House			
Ball Mill	Maint. Shop	Rubber Shop	Wash Plant			
Calciners	Mobile Shop	Silica	Washed Reclaim			
Compressor	NE Maint.	X SPA Filter	B Bed shack			
Chem. Bldg.	Phos Acid	North Sulfuric	Lab			
Check phone list for phone number in area.						
Nature of injuries	X	None	Thermal burn	Laceration		
		Fall	Chem. Burn	Other		
Area of body affected		Eyes	Arms	Back		
		Face & Head	Hands	Legs		
		Neck	Chest	Feet		
Do we Need?		Ambulance	Evacuation	Emergency Responce Team		
		Other	X	None		
Wind		MPH	2	Direction out the area		
direction & Speed		Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3				
Filled out by:		Daren Maughan				
Visual check:		South to North				
		0 North Send to Zone 4 Send to Zone 1 270 West Send to Zone 3 Send to Zone 2 90 East 180 South				

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 6/10/2008

TIME: 1450

updated 9/16/03

ANSWERED:		<input checked="" type="checkbox"/> Lab	<input type="checkbox"/> Safety	<input checked="" type="checkbox"/> Guard
Name of person calling: Doug Graunke			Was 333 called?	Yes
Nature of emergency	Accident		Number of people injured	
	Explosion		Contained	Fully
	Fire			Amount not contained
	<input checked="" type="checkbox"/> Release	500		Amount/ Gal
Detailed Comments: Pond water release at reactor				
Area of emergency				
Pond	Granulation	Phos Maint.	East Sulfuric	
NH3 Sphere	DCS,PPA	Product Ship.	West Sulfuric	
Front Office	E & I	Rollover	Ware House	
Ball Mill	Maint. Shop	Rubber Shop	Wash Plant	
Calciners	Mobile Shop	Silica	Washed Reclaim	
Compressor	NE Maint.	SPA Filter	B Bed shack	
Chem. Bldg.	<input checked="" type="checkbox"/> Phos Acid	North Sulfuric	Lab	
Check phone list for phone number in area.				
Nature of injuries	<input checked="" type="checkbox"/> None	Thermal burn	Laceration	
	Fall	Chem. Burn	Other	
Area of body affected	Eyes	Arms	Back	
	Face & Head	Hands	Legs	
	Neck	Chest	Feet	
Do we Need?	Ambulance	Evacuation	Emergency Responce Team	
	Other	<input checked="" type="checkbox"/> None		
Wind direction & Speed		<div style="text-align: center;"> <p>0 North</p> <p>Send to Zone 4 Send to Zone 1</p> <p>270 West 90 East</p> <p>Send to Zone 3 Send to Zone 2</p> <p>180 South</p> </div>		
MPH 15 Direction SW				
Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3				
Filled out by: Tony Wuthrich				
Visual check: South to North				

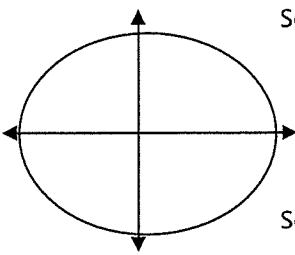
EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 6/26/2008

TIME: 14:50

updated 9/16/03

ANSWERED:				<input checked="" type="checkbox"/> <i>Lab</i>	<input checked="" type="checkbox"/> <i>Safety</i>	<input checked="" type="checkbox"/> <i>Guard</i>																												
Name of person calling: Shane Passey				Was 333 called?		Yes																												
Nature of emergency	<i>Accident</i>		<i>Number of people injured</i>		<i>0</i>																													
	<i>Explosion</i>		<div style="border: 1px solid black; padding: 2px;">Contained</div>	<div style="border: 1px solid black; padding: 2px;">Fully</div>																														
	<i>Fire</i>			<div style="border: 1px solid black; padding: 2px;">Amount not contained</div>																														
	<input checked="" type="checkbox"/> <i>Release</i>	1000		<i>Amount/ Gal</i>	<div style="border: 1px solid black; padding: 2px;">?</div>	<input checked="" type="checkbox"/> <i>Partially</i>																												
Detailed Comments: Spilled 1000 gal. of molten sulfur by the sulfur pit.																																		
Area of emergency <table border="0" style="width: 100%;"> <tr> <td><i>Pond</i></td> <td><i>Granulation</i></td> <td><i>Phos Maint.</i></td> <td><input checked="" type="checkbox"/> <i>East Sulfuric</i></td> </tr> <tr> <td><i>NH3 Sphere</i></td> <td><i>DCS,PPA</i></td> <td><i>Product Ship.</i></td> <td><i>West Sulfuric</i></td> </tr> <tr> <td><i>Front Office</i></td> <td><i>E & I</i></td> <td><i>Rollover</i></td> <td><i>Ware House</i></td> </tr> <tr> <td><i>Ball Mill</i></td> <td><i>Maint. Shop</i></td> <td><i>Rubber Shop</i></td> <td><i>Wash Plant</i></td> </tr> <tr> <td><i>Calciners</i></td> <td><i>Mobile Shop</i></td> <td><i>Silica</i></td> <td><i>Washed Reclaim</i></td> </tr> <tr> <td><i>Compressor</i></td> <td><i>NE Maint.</i></td> <td><i>SPA Filter</i></td> <td><i>B Bed shack</i></td> </tr> <tr> <td><i>Chem. Bldg.</i></td> <td><i>Phos Acid</i></td> <td><i>North Sulfuric</i></td> <td><i>Lab</i></td> </tr> </table> Check phone list for phone number in area.							<i>Pond</i>	<i>Granulation</i>	<i>Phos Maint.</i>	<input checked="" type="checkbox"/> <i>East Sulfuric</i>	<i>NH3 Sphere</i>	<i>DCS,PPA</i>	<i>Product Ship.</i>	<i>West Sulfuric</i>	<i>Front Office</i>	<i>E & I</i>	<i>Rollover</i>	<i>Ware House</i>	<i>Ball Mill</i>	<i>Maint. Shop</i>	<i>Rubber Shop</i>	<i>Wash Plant</i>	<i>Calciners</i>	<i>Mobile Shop</i>	<i>Silica</i>	<i>Washed Reclaim</i>	<i>Compressor</i>	<i>NE Maint.</i>	<i>SPA Filter</i>	<i>B Bed shack</i>	<i>Chem. Bldg.</i>	<i>Phos Acid</i>	<i>North Sulfuric</i>	<i>Lab</i>
<i>Pond</i>	<i>Granulation</i>	<i>Phos Maint.</i>	<input checked="" type="checkbox"/> <i>East Sulfuric</i>																															
<i>NH3 Sphere</i>	<i>DCS,PPA</i>	<i>Product Ship.</i>	<i>West Sulfuric</i>																															
<i>Front Office</i>	<i>E & I</i>	<i>Rollover</i>	<i>Ware House</i>																															
<i>Ball Mill</i>	<i>Maint. Shop</i>	<i>Rubber Shop</i>	<i>Wash Plant</i>																															
<i>Calciners</i>	<i>Mobile Shop</i>	<i>Silica</i>	<i>Washed Reclaim</i>																															
<i>Compressor</i>	<i>NE Maint.</i>	<i>SPA Filter</i>	<i>B Bed shack</i>																															
<i>Chem. Bldg.</i>	<i>Phos Acid</i>	<i>North Sulfuric</i>	<i>Lab</i>																															
Nature of injuries	<input checked="" type="checkbox"/> <i>None</i>	<i>Thermal burn</i>		<i>Laceration</i>																														
	<i>Fall</i>	<i>Chem. Burn</i>		<i>Other</i>																														
Area of body affected	<i>Eyes</i>		<i>Arms</i>		<i>Back</i>																													
	<i>Face & Head</i>		<i>Hands</i>		<i>Legs</i>																													
	<i>Neck</i>		<i>Chest</i>		<i>Feet</i>																													
Do we Need?	<i>Ambulance</i>		<i>Evacuation</i>		<i>Emergency Responce Team</i>																													
	<i>Other</i>		<input checked="" type="checkbox"/> <i>None</i>																															
Wind direction & Speed <i>MPH 10 Direction SW</i> Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3		<div style="text-align: center;"> 0 North Send to Zone 4 Send to Zone 1 270 West 90 East Send to Zone 3 Send to Zone 2 180 South </div> 																																
Filled out by: Steve Moore																																		
Visual check: South to North																																		

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 7/3/2008

TIME: 20:00

updated 9/16/03

ANSWERED:		<input checked="" type="checkbox"/> Lab	<input type="checkbox"/> Safety	<input checked="" type="checkbox"/> Guard
Name of person calling: Bruce stoor			Was 333 called?	Yes
Nature of emergency	Accident		Number of people injured	
	Explosion		Contained	Fully
	Fire			Amount not contained
	<input checked="" type="checkbox"/> Release	own (Amount/ Gal		small amount
Detailed Comments: 70% Phosphoric Acid out of tk 51				
Area of emergency				
Pond	Granulation	Phos Maint.	East Sulfuric	
NH3 Sphere	DCS,PPA	Product Ship.	West Sulfuric	
Front Office	E & I	Rollover	Ware House	
Ball Mill	Maint. Shop	Rubber Shop	Wash Plant	
Calciners	Mobile Shop	Silica	Washed Reclaim	
Compressor	NE Maint.	<input checked="" type="checkbox"/> SPA Filter	B Bed shack	
Chem. Bldg.	Phos Acid	North Sulfuric	Lab	
Check phone list for phone number in area.				
Nature of injuries	<input checked="" type="checkbox"/> None	Thermal burn	Laceration	
	Fall	Chem. Burn	Other	
Area of body affected	Eyes	Arms	Back	
	Face & Head	Hands	Legs	
	Neck	Chest	Feet	
Do we Need?	Ambulance	Evacuation	Emergency Responce Team	
	Other	<input checked="" type="checkbox"/> None		
Wind direction & Speed		<div style="text-align: center;"> <p>0 North</p> <p>Send to Zone 4 Send to Zone 1</p> <p>270 West 90 East</p> <p>Send to Zone 3 Send to Zone 2</p> <p>180 South</p> </div>		
MPH 7 Direction NE				
<p>Cross out area that the wind is coming from.</p> <p>This will tell where to send the people to.</p> <p>Send to Zone No wind send to Zone 3</p>				
Filled out by: Tony Wuthrich				
Visual check: East to West				

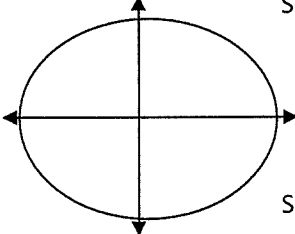
EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 7/3/2008

TIME: 8:20

updated 9/16/03

ANSWERED:				X	<i>Lab</i>	X	<i>Safety</i>	X	<i>Guard</i>																												
Name of person calling: Shane Clark						Was 333 called?		Yes																													
Nature of emergency		<i>Accident</i>		<i>Number of people injured</i>																																	
		<i>Explosion</i>		<div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin-right: 5px;"> <i>Contained</i> </div> <div style="border-top: 1px dashed black; border-bottom: 1px dashed black; padding: 0 10px;"> X <i>Fully</i> </div> </div>																																	
		<i>Fire</i>																																			
		X <i>Release</i>		1000	<i>Amount/ Gal</i>	<div style="display: flex; align-items: center;"> <div style="border-top: 1px dashed black; border-bottom: 1px dashed black; padding: 0 10px;"> <i>Amount not contained</i> </div> <div style="margin-left: 10px;"> <i>Partially</i> </div> </div>																															
Detailed Comments: Spilled 1000 gal. of pond water at SPA																																					
Area of emergency <table border="0" style="width: 100%;"> <tr> <td><i>Pond</i></td> <td><i>Granulation</i></td> <td><i>Phos Maint.</i></td> <td><i>East Sulfuric</i></td> </tr> <tr> <td><i>NH3 Sphere</i></td> <td><i>DCS,PPA</i></td> <td><i>Product Ship.</i></td> <td><i>West Sulfuric</i></td> </tr> <tr> <td><i>Front Office</i></td> <td><i>E & I</i></td> <td><i>Rollover</i></td> <td><i>Ware House</i></td> </tr> <tr> <td><i>Ball Mill</i></td> <td><i>Maint. Shop</i></td> <td><i>Rubber Shop</i></td> <td><i>Wash Plant</i></td> </tr> <tr> <td><i>Calciners</i></td> <td><i>Mobile Shop</i></td> <td><i>Silica</i></td> <td><i>Washed Reclaim</i></td> </tr> <tr> <td><i>Compressor</i></td> <td><i>NE Maint.</i></td> <td>X <i>SPA Filter</i></td> <td><i>B Bed shack</i></td> </tr> <tr> <td><i>Chem. Bldg.</i></td> <td><i>Phos Acid</i></td> <td><i>North Sulfuric</i></td> <td><i>Lab</i></td> </tr> </table> <p>Check phone list for phone number in area.</p>										<i>Pond</i>	<i>Granulation</i>	<i>Phos Maint.</i>	<i>East Sulfuric</i>	<i>NH3 Sphere</i>	<i>DCS,PPA</i>	<i>Product Ship.</i>	<i>West Sulfuric</i>	<i>Front Office</i>	<i>E & I</i>	<i>Rollover</i>	<i>Ware House</i>	<i>Ball Mill</i>	<i>Maint. Shop</i>	<i>Rubber Shop</i>	<i>Wash Plant</i>	<i>Calciners</i>	<i>Mobile Shop</i>	<i>Silica</i>	<i>Washed Reclaim</i>	<i>Compressor</i>	<i>NE Maint.</i>	X <i>SPA Filter</i>	<i>B Bed shack</i>	<i>Chem. Bldg.</i>	<i>Phos Acid</i>	<i>North Sulfuric</i>	<i>Lab</i>
<i>Pond</i>	<i>Granulation</i>	<i>Phos Maint.</i>	<i>East Sulfuric</i>																																		
<i>NH3 Sphere</i>	<i>DCS,PPA</i>	<i>Product Ship.</i>	<i>West Sulfuric</i>																																		
<i>Front Office</i>	<i>E & I</i>	<i>Rollover</i>	<i>Ware House</i>																																		
<i>Ball Mill</i>	<i>Maint. Shop</i>	<i>Rubber Shop</i>	<i>Wash Plant</i>																																		
<i>Calciners</i>	<i>Mobile Shop</i>	<i>Silica</i>	<i>Washed Reclaim</i>																																		
<i>Compressor</i>	<i>NE Maint.</i>	X <i>SPA Filter</i>	<i>B Bed shack</i>																																		
<i>Chem. Bldg.</i>	<i>Phos Acid</i>	<i>North Sulfuric</i>	<i>Lab</i>																																		
Nature of injuries		X <i>None</i>	<i>Thermal burn</i>		<i>Laceration</i>																																
		<i>Fall</i>	<i>Chem. Burn</i>		<i>Other</i>																																
Area of body affected		<i>Eyes</i>		<i>Arms</i>		<i>Back</i>																															
		<i>Face & Head</i>		<i>Hands</i>		<i>Legs</i>																															
		<i>Neck</i>		<i>Chest</i>		<i>Feet</i>																															
Do we Need?		<i>Ambulance</i>		<i>Evacuation</i>		<i>Emergency Responce Team</i>																															
		<i>Other</i>		X <i>None</i>																																	
Wind <i>MPH</i> 0 <i>Direction</i> direction & Speed Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone 3 No wind send to Zone 3		<div style="text-align: center;"> <p>0 North</p> <p>Send to Zone 4 Send to Zone 1</p>  <p>270 West 90 East</p> <p>Send to Zone 3 Send to Zone 2</p> <p>180 South</p> </div>																																			
Filled out by: Steve Moore																																					
Visual check:																																					

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 7/4/2008

TIME: 21:45

updated 9/16/03

ANSWERED:		<input checked="" type="checkbox"/> Lab	<input type="checkbox"/> Safety	<input checked="" type="checkbox"/> Guard
Name of person calling: Dale Humpherys			Was 333 called?	Yes
Nature of emergency	Accident		Number of people injured	
	Explosion		Contained	Fully
	Fire			Amount not contained
	<input checked="" type="checkbox"/> Release	1000		Amount/ Gal
Detailed Comments: Pond water spill from north side new filter building				
Area of emergency				
Pond	Granulation	Phos Maint.	East Sulfuric	
NH3 Sphere	DCS,PPA	Product Ship.	West Sulfuric	
Front Office	E & I	Rollover	Ware House	
Ball Mill	Maint. Shop	Rubber Shop	Wash Plant	
Calciners	Mobile Shop	Silica	Washed Reclaim	
Compressor	NE Maint.	SPA Filter	B Bed shack	
Chem. Bldg.	<input checked="" type="checkbox"/> Phos Acid	North Sulfuric	Lab	
Check phone list for phone number in area.				
Nature of injuries	<input checked="" type="checkbox"/> None	Thermal burn	Laceration	
	Fall	Chem. Burn	Other	
Area of body affected	Eyes	Arms	Back	
	Face & Head	Hands	Legs	
	Neck	Chest	Feet	
Do we Need?	Ambulance	Evacuation	Emergency Responce Team	
	Other	<input checked="" type="checkbox"/> None		
Wind direction & Speed		<div style="text-align: center;"> <p>0 North</p> <p>Send to Zone 4 Send to Zone 1</p> <p>270 West 90 East</p> <p>Send to Zone 3 Send to Zone 2</p> <p>180 South</p> </div>		
MPH 5 Direction South Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3				
Filled out by: Tony Wuthrich				
Visual check: South to North				

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 7/7/2008

TIME: 204

updated 9/16/03

ANSWERED:		<input checked="" type="checkbox"/> Lab	<input type="checkbox"/> Safety	<input checked="" type="checkbox"/> Guard
Name of person calling: Frank Moore			Was 333 called? Yes	
Nature of emergency	Accident		Number of people injured	
	Explosion		<input type="checkbox"/> Contained <input checked="" type="checkbox"/> Amount not contained	<input checked="" type="checkbox"/> Fully
	Fire			Partially
	<input checked="" type="checkbox"/> Release	nknow		Amount/ Gal
Detailed Comments: A valve to the ditch was left open post turnaround				
Area of emergency				
Pond	Granulation	Phos Maint.	East Sulfuric	
NH3 Sphere	DCS,PPA	Product Ship.	West Sulfuric	
Front Office	E & I	Rollover	Ware House	
Ball Mill	Maint. Shop	Rubber Shop	Wash Plant	
Calciners	Mobile Shop	Silica	Washed Reclaim	
Compressor	NE Maint.	<input checked="" type="checkbox"/> SPA Filter	B Bed shack	
Chem. Bldg.	Phos Acid	North Sulfuric	Lab	
Check phone list for phone number in area.				
Nature of injuries	<input checked="" type="checkbox"/> None	Thermal burn	Laceration	
	Fall	Chem. Burn	Other	
Area of body affected	Eyes	Arms	Back	
	Face & Head	Hands	Legs	
	Neck	Chest	Feet	
Do we Need?	Ambulance	Evacuation	Emergency Responce Team	
	Other	<input checked="" type="checkbox"/> None		
Wind MPH 5 Direction east		0 North Send to Zone 4 Send to Zone 1 270 West Send to Zone 3 Send to Zone 2 180 South		
direction & Speed Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3				
Filled out by: Howard Johnson				
Visual check: East to West				

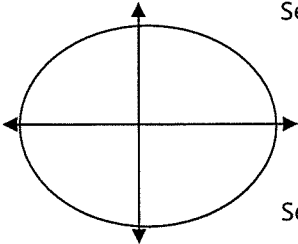
EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 7/16/2008

TIME: 505

updated 9/16/03

ANSWERED:		<input checked="" type="checkbox"/> <i>Lab</i>	<i>Safety</i>	<input checked="" type="checkbox"/> <i>Guard</i>
Name of person calling: Cody Muir			Was 333 called?	Yes
Nature of emergency	<i>Accident</i>		<i>Number of people injured</i>	
	<i>Explosion</i>		<i>Contained</i>	<input checked="" type="checkbox"/> <i>Fully</i>
	<i>Fire</i>			<i>Amount not contained</i>
	<input checked="" type="checkbox"/> <i>Release</i>	400 <i>Amount/ Gal</i>		<i>Partially</i>
Detailed Comments: Phos acid spilled 400 gal. of 30% acid				
Area of emergency				
<i>Pond</i>	<i>Granulation</i>	<i>Phos Maint.</i>	<i>East Sulfuric</i>	
<i>NH3 Sphere</i>	<i>DCS,PPA</i>	<i>Product Ship.</i>	<i>West Sulfuric</i>	
<i>Front Office</i>	<i>E & I</i>	<i>Rollover</i>	<i>Ware House</i>	
<i>Ball Mill</i>	<i>Maint. Shop</i>	<i>Rubber Shop</i>	<i>Wash Plant</i>	
<i>Calciners</i>	<i>Mobile Shop</i>	<i>Silica</i>	<i>Washed Reclaim</i>	
<i>Compressor</i>	<i>NE Maint.</i>	<i>SPA Filter</i>	<i>B Bed shack</i>	
<i>Chem. Bldg.</i>	<input checked="" type="checkbox"/> <i>Phos Acid</i>	<i>North Sulfuric</i>	<i>Lab</i>	
Check phone list for phone number in area.				
Nature of injuries	<input checked="" type="checkbox"/> <i>None</i>	<i>Thermal burn</i>	<i>Laceration</i>	
	<i>Fall</i>	<i>Chem. Burn</i>	<i>Other</i>	
Area of body affected	<i>Eyes</i>	<i>Arms</i>	<i>Back</i>	
	<i>Face & Head</i>	<i>Hands</i>	<i>Legs</i>	
	<i>Neck</i>	<i>Chest</i>	<i>Feet</i>	
Do we Need?	<i>Ambulance</i>	<i>Evacuation</i>	<i>Emergency Responce Team</i>	
	<i>Other</i>	<input checked="" type="checkbox"/> <i>None</i>		
Wind <i>MPH</i> 5 <i>Direction</i> East		<div style="text-align: center;"> <p>0 North</p> <p>Send to Zone 4 Send to Zone 1</p>  <p>270 West 90 East</p> <p>Send to Zone 3 Send to Zone 2</p> <p>180 South</p> </div>		
direction & Speed				
Cross out area that the wind is coming from.				
This will tell where to send the people to.				
Send to Zone No wind send to Zone 3				
Filled out by: Matthew Martinez				
Visual check: East to West				

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 7/16/2008

TIME: 500

updated 9/16/03

ANSWERED:		<input checked="" type="checkbox"/> Lab	<input type="checkbox"/> Safety	<input checked="" type="checkbox"/> Guard																												
Name of person calling: Dirk Stucki			Was 333 called? Yes																													
Nature of emergency	Accident		Number of people injured																													
	Explosion		None																													
	Fire		Contained	<input checked="" type="checkbox"/> Fully																												
	<input checked="" type="checkbox"/> Release 2000 Amount/ Gal			Amount not contained																												
Detailed Comments: Spilled 2000 gal. of pond water into secondary containment area. At the SPA scrubber																																
Area of emergency <table border="0"> <tr> <td>Pond</td> <td>Granulation</td> <td>Phos Maint.</td> <td>East Sulfuric</td> </tr> <tr> <td>NH3 Sphere</td> <td>DCS,PPA</td> <td>Product Ship.</td> <td>West Sulfuric</td> </tr> <tr> <td>Front Office</td> <td>E & I</td> <td>Rollover</td> <td>Ware House</td> </tr> <tr> <td>Ball Mill</td> <td>Maint. Shop</td> <td>Rubber Shop</td> <td>Wash Plant</td> </tr> <tr> <td>Calciners</td> <td>Mobile Shop</td> <td>Silica</td> <td>Washed Reclaim</td> </tr> <tr> <td>Compressor</td> <td>NE Maint.</td> <td>SPA Filter</td> <td>B Bed shack</td> </tr> <tr> <td>Chem. Bldg.</td> <td>Phos Acid</td> <td>North Sulfuric</td> <td>Lab</td> </tr> </table> Check phone list for phone number in area.					Pond	Granulation	Phos Maint.	East Sulfuric	NH3 Sphere	DCS,PPA	Product Ship.	West Sulfuric	Front Office	E & I	Rollover	Ware House	Ball Mill	Maint. Shop	Rubber Shop	Wash Plant	Calciners	Mobile Shop	Silica	Washed Reclaim	Compressor	NE Maint.	SPA Filter	B Bed shack	Chem. Bldg.	Phos Acid	North Sulfuric	Lab
Pond	Granulation	Phos Maint.	East Sulfuric																													
NH3 Sphere	DCS,PPA	Product Ship.	West Sulfuric																													
Front Office	E & I	Rollover	Ware House																													
Ball Mill	Maint. Shop	Rubber Shop	Wash Plant																													
Calciners	Mobile Shop	Silica	Washed Reclaim																													
Compressor	NE Maint.	SPA Filter	B Bed shack																													
Chem. Bldg.	Phos Acid	North Sulfuric	Lab																													
Nature of injuries	<input checked="" type="checkbox"/> None	Thermal burn	Laceration																													
	Fall	Chem. Burn	Other																													
Area of body affected	Eyes	Arms	Back																													
	Face & Head	Hands	Legs																													
	Neck	Chest	Feet																													
Do we Need?	Ambulance	Evacuation	Emergency Responce Team																													
	Other	<input checked="" type="checkbox"/> None																														
Wind direction & Speed MPH 5 Direction NE Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3		0 North Send to Zone 4 Send to Zone 1 270 West 90 East Send to Zone 3 Send to Zone 2 180 South																														
Filled out by: Matthew Martinez																																
Visual check: East to West																																

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 7/17/2008

TIME: 17:50:00

Revised 7/16/2008

ANSWERED:				<i>Lab</i>	<input checked="" type="checkbox"/>	<i>Safety</i>	<input type="checkbox"/>	<i>Guard</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Name of person calling: <u>Shane Passey</u>												
Was 333 called?												
Yes		<input checked="" type="checkbox"/>										
No		<input type="checkbox"/>										
Nature of Emergency:					Release Information: (In Gallons)							
Accident		<input type="checkbox"/>			Amount Spilled			<input type="text" value="3"/>				
Explosion		<input type="checkbox"/>			Amount Contained			<input type="text" value="3"/>				
Fire		<input type="checkbox"/>			Amount Not Contained			<input type="text"/>				
Release		<input checked="" type="checkbox"/>										
Detailed Comments: (Be Specific) H2SO4 Spill: 93 to 98% Transfer line Sprung a leak @ a "T" It has been isolated												
Area of emergency: (Be Specific)												
East sulfuric												
Nature of Injuries		None		<input checked="" type="checkbox"/>		Thermal burn		<input type="checkbox"/>		Laceration	<input type="checkbox"/>	
		Fall		<input type="checkbox"/>		Chem. Burn		<input type="checkbox"/>		Other		<input type="checkbox"/>
Area affected		Eyes		<input type="checkbox"/>		Arms		<input type="checkbox"/>		Back		<input type="checkbox"/>
		Face & Head		<input type="checkbox"/>		Hands		<input type="checkbox"/>		Legs		<input type="checkbox"/>
		Neck		<input type="checkbox"/>		Chest		<input type="checkbox"/>		Feet		<input type="checkbox"/>
Do we Need?		Ambulance		<input type="checkbox"/>		Evacuation		<input type="checkbox"/>		ER Team		<input type="checkbox"/>
		Other		<input type="checkbox"/>		None		<input checked="" type="checkbox"/>				
Wind direction & Speed		MPH		<input type="text" value="2"/>		Direction		<input type="text" value="NW"/>		<div style="text-align: center;"> 0 North Send to Zone 4 Send to Zone 1 270 West 90 East Send to Zone 3 Send to Zone 2 180 South </div>		
		Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3										
Filled out by:		J Kennedy										
Visual check:		Yes										

NUW 006328

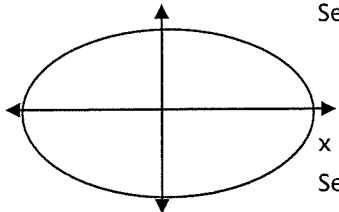
EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 7/21/2008

TIME: 1:52

Revised 7/16/2008

ANSWERED:				<i>Lab</i>	<input checked="" type="checkbox"/>	<i>Safety</i>	<input type="checkbox"/>	<i>Guard</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Name of person calling: <u>Mike Perkins</u>										
Was 333 called?										
Yes		<input checked="" type="checkbox"/>								
No		<input type="checkbox"/>								
Nature of Emergency:					Release Information: (In Gallons)					
Accident		<input type="checkbox"/>		Amount Spilled			<input type="text" value="unknown"/>			
Explosion		<input type="checkbox"/>		Amount Contained			<input type="text" value="unknown"/>			
Fire		<input type="checkbox"/>		Amount Not Contained			<input type="text" value="20,000"/>			
Release		<input checked="" type="checkbox"/>								
Detailed Comments: (Be Specific)		The wash line to the GYP Disposal tank broke and was spraying Gypsum and process water out of the filter building across the road to the duran sump and north to the E&I shop.								
Area of emergency: (Be Specific)		Phos rock operations Phos filter building on the bottom floor at the gyp disposal tank.								
Nature of Injuries		None		<input checked="" type="checkbox"/>	Thermal burn		<input type="checkbox"/>	Laceration		<input type="checkbox"/>
		Fall		<input type="checkbox"/>	Chem. Burn		<input type="checkbox"/>	Other		<input type="checkbox"/>
Area affected		Eyes		<input type="checkbox"/>	Arms		<input type="checkbox"/>	Back		<input type="checkbox"/>
		Face & Head		<input type="checkbox"/>	Hands		<input type="checkbox"/>	Legs		<input type="checkbox"/>
		Neck		<input type="checkbox"/>	Chest		<input type="checkbox"/>	Feet		<input type="checkbox"/>
Do we Need?		Ambulance		<input type="checkbox"/>	Evacuation		<input type="checkbox"/>	ER Team		<input type="checkbox"/>
		Other		<input type="checkbox"/>				None		<input checked="" type="checkbox"/>
Wind direction & Speed		MPH		<input type="text" value="6"/>	Direction		<input type="text"/>			
Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone 2 No wind send to Zone 3		Send to Zone 4				Send to Zone 1				
		Send to Zone 3				Send to Zone 2				
Filled out by: Howard Johnson										
Visual check:		southeast to northwest								

NUW 006329

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 7/25/2008

TIME: 19:42

Revised 7/16/2008

ANSWERED:				<i>Lab</i>	<input checked="" type="checkbox"/>	<i>Safety</i>	<input type="checkbox"/>	<i>Guard</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Name of person calling: <u>Clair Christensen</u>										
Was 333 called? <div style="display: flex; justify-content: space-between;"> <div> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> </div> </div>										
Nature of Emergency:				Release Information: (In Gallons)						
Accident	<input type="checkbox"/>	Amount Spilled		<input type="text" value="400-500"/>						
Explosion	<input type="checkbox"/>	Amount Contained		<input type="text"/>						
Fire	<input type="checkbox"/>	Amount Not Contained		<input type="text" value="400-500"/>						
Release	<input checked="" type="checkbox"/>									
Detailed Comments: (Be Specific)		20% P205 acid (#9 Filtrate) released from a broken line east side of filter building between old ballmill and filter building.								
Area of emergency: (Be Specific)		Phos acid filter building								
Nature of Injuries		<i>None</i> <input checked="" type="checkbox"/>		<i>Thermal burn</i> <input type="checkbox"/>		<i>Laceration</i> <input type="checkbox"/>				
		<i>Fall</i> <input type="checkbox"/>		<i>Chem. Burn</i> <input type="checkbox"/>		<i>Other</i> <input type="checkbox"/>				
Area affected		<i>Eyes</i> <input type="checkbox"/>		<i>Arms</i> <input type="checkbox"/>		<i>Back</i> <input type="checkbox"/>				
		<i>Face & Head</i> <input type="checkbox"/>		<i>Hands</i> <input type="checkbox"/>		<i>Legs</i> <input type="checkbox"/>				
		<i>Neck</i> <input type="checkbox"/>		<i>Chest</i> <input type="checkbox"/>		<i>Feet</i> <input type="checkbox"/>				
Do we Need?		<i>Ambulance</i> <input type="checkbox"/>		<i>Evacuation</i> <input type="checkbox"/>		<i>ER Team</i> <input type="checkbox"/>				
		<i>Other</i> <input type="checkbox"/>		<i>None</i> <input checked="" type="checkbox"/>						
Wind direction & Speed MPH <input type="text" value="6"/> Direction <input type="text" value="SE"/> Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3		<div style="text-align: center;"> 0 North Send to Zone 4 Send to Zone 1 270 West 90 East Send to Zone 3 Send to Zone 2 180 South </div>								
Filled out by: J Kennedy										
Visual check:										

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 7/28/2008

TIME: 22:48

Revised 7/16/2008

ANSWERED:		<i>Lab</i>	<input checked="" type="checkbox"/>	<i>Safety</i>	<input type="checkbox"/>	<i>Guard</i>	<input checked="" type="checkbox"/>
Name of person calling: <u>Boyd Dunken</u>							
Was 333 called? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>							
Nature of Emergency: Accident <input type="checkbox"/> Explosion <input type="checkbox"/> Fire <input type="checkbox"/> Release <input checked="" type="checkbox"/>				Release Information: (In Gallons) Amount Spilled <input type="text" value="500"/> Amount Contained <input type="text" value="500"/> Amount Not Contained <input type="text"/>			
Detailed Comments: 500 gallons of 42% acid out of tank 18 spilled into secondary containment. (Be Specific)							
Area of emergency: PHOS. ACID (Be Specific)							
Nature of Injuries None <input checked="" type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration <input type="checkbox"/> Fall <input type="checkbox"/> Chem. Burn <input type="checkbox"/> Other <input type="checkbox"/>							
Area affected Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back <input type="checkbox"/> Face & Head <input type="checkbox"/> Hands <input type="checkbox"/> Legs <input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet <input type="checkbox"/>							
Do we Need? Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> ER Team <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/>							
Wind direction & Speed MPH <input type="text" value="6"/> Direction <input type="text" value="SE"/> Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3				<div style="text-align: center;"> <p>0 North</p> <p>180 South</p> </div>			
Filled out by: Matthew Martinez							
Visual check: southeast to northwest							

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 7/28/2008

TIME: 21:58

Revised 7/16/2008

ANSWERED:				<i>Lab</i>	<input checked="" type="checkbox"/>	<i>Safety</i>	<input type="checkbox"/>	<i>Guard</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Name of person calling: <u>Boyd Dunken</u>										
Was 333 called? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>										
Nature of Emergency:					Release Information: (In Gallons)					
Accident	<input type="checkbox"/>	Amount Spilled			<input type="text" value="350"/>					
Explosion	<input type="checkbox"/>	Amount Contained			<input type="text"/>					
Fire	<input type="checkbox"/>	Amount Not Contained			<input type="text" value="350"/>					
Release	<input checked="" type="checkbox"/>									
Tank 12 launder ran over and spilled 350 gallons of 30% acid onto ground.										
Area of emergency: <u>PHOS. ACID</u> (Be Specific)										
Nature of Injuries None <input checked="" type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration <input type="checkbox"/> Fall <input type="checkbox"/> Chem. Burn <input type="checkbox"/> Other <input type="checkbox"/>										
Area affected Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back <input type="checkbox"/> Face & Head <input type="checkbox"/> Hands <input type="checkbox"/> Legs <input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet <input type="checkbox"/>										
Do we Need? Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> ER Team <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/>										
Wind direction & Speed MPH <input type="text" value="7"/> Direction <input type="text" value="SE"/> Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3				<div style="text-align: center;"> 0 North 270 West 180 South 90 East </div> <div style="text-align: center;"> </div>						
Filled out by: <u>Matthew Martinez</u>				Send to Zone 4 Send to Zone 1 Send to Zone 3 Send to Zone 2						
Visual check: <u>Southeast to Northwest</u>										

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 7/29/2008

TIME: 1:25

Revised 7/16/2008

ANSWERED:				<i>Lab</i>	<input checked="" type="checkbox"/>	<i>Safety</i>	<input type="checkbox"/>	<i>Guard</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Name of person calling: <u>Carl Haslam</u>										
Was 333 called? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>										
Nature of Emergency: Accident <input type="checkbox"/> Explosion <input type="checkbox"/> Fire <input type="checkbox"/> Release <input checked="" type="checkbox"/>					Release Information: (In Gallons) Amount Spilled <input type="text" value="4 to 5"/> Amount Contained <input type="text"/> Amount Not Contained <input type="text" value="4 to 5"/>					
Detailed Comments: <u>A pin hole leak in caustic line squirted 4 to 5 gallons onto road</u> (Be Specific)										
Area of emergency: <u>East Sulfuric</u> (Be Specific)										
Nature of Injuries None <input checked="" type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration <input type="checkbox"/> Fall <input type="checkbox"/> Chem. Burn <input type="checkbox"/> Other <input type="checkbox"/>										
Area affected Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back <input type="checkbox"/> Face & Head <input type="checkbox"/> Hands <input type="checkbox"/> Legs <input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet <input type="checkbox"/>										
Do we Need? Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> ER Team <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/>										
Wind direction & Speed MPH <input type="text" value="0"/> Direction <input type="text" value="SW"/> Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3				<div style="text-align: center;"> <p>0 North</p> <p>Send to Zone 4</p> <p>Send to Zone 1</p> <p>270 West</p> <p>90 East</p> <p>Send to Zone 3</p> <p>Send to Zone 2</p> <p>180 South</p> </div>						
Filled out by: <u>Matthew Martinez</u>										
Visual check: <u>southwest to northeast</u>										

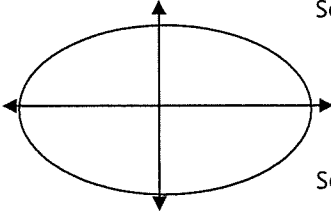
EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 8/2/2008

TIME: 2:20

Revised 7/16/2008

ANSWERED:			
<i>Lab</i>	<input checked="" type="checkbox"/>	<i>Safety</i>	<input type="checkbox"/>
<i>Guard</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Name of person calling: <u>Dale Humpherys</u>			
Was 333 called?			
Yes	<input checked="" type="checkbox"/>		
No	<input type="checkbox"/>		
Nature of Emergency:		Release Information: (In Gallons)	
Accident	<input type="checkbox"/>	Amount Spilled	500
Explosion	<input type="checkbox"/>	Amount Contained	375
Fire	<input type="checkbox"/>	Amount Not Contained	125
Release	<input checked="" type="checkbox"/>	Phos Acid	
Detailed Comments: (Be Specific)		A Drisco line burst running Phos acid down the wall and some acid ran outside near the SPA burners	
Area of emergency: (Be Specific)		The burst drisco line was near the top of the #7 Evap and covered some of the Phos building wall as well as the ground near #1 and #2 SPA Burner	
Nature of Injuries		None <input checked="" type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration <input type="checkbox"/>	
		Fall <input type="checkbox"/> Chem. Burn <input type="checkbox"/> Other <input type="checkbox"/>	
Area affected		Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back <input type="checkbox"/>	
		Face & Head <input type="checkbox"/> Hands <input type="checkbox"/> Legs <input type="checkbox"/>	
		Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet <input type="checkbox"/>	
Do we Need?		Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> ER Team <input type="checkbox"/>	
		Other <input type="checkbox"/> None <input checked="" type="checkbox"/>	
Wind direction & Speed MPH <input type="text" value="0"/> Direction <input type="text"/>		<div style="text-align: center;">0 North Send to Zone 4 270 West Send to Zone 3 180 South Send to Zone 1 90 East Send to Zone 2</div> 	
Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3			
Filled out by: Tony Wuthrich			
Visual check:			

NUW 006334

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 8/2/2008

TIME: 5:00

Revised 7/16/2008

ANSWERED:				<i>Lab</i>	<input checked="" type="checkbox"/>	<i>Safety</i>	<input type="checkbox"/>	<i>Guard</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Name of person calling: <u>Dale Humpherys</u>										
Was 333 called? <div style="display: flex; justify-content: space-between;"> <div> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> </div> </div>										
Nature of Emergency: <div style="display: flex;"> <div style="flex: 1;"> Accident <input type="checkbox"/> Explosion <input type="checkbox"/> Fire <input type="checkbox"/> Release <input checked="" type="checkbox"/> </div> <div style="flex: 1;"> Pond Water </div> </div>				Release Information: (In Gallons) <div style="display: flex; justify-content: space-between;"> <div> Amount Spilled <input type="checkbox"/> Amount Contained <input type="checkbox"/> Amount Not Contained <input type="checkbox"/> </div> <div> unknown 100 </div> </div>						
Detailed Comments: (Be Specific) A flash cooler in the filter building was being boiled out and overflowed also the baro tank overflowed										
Area of emergency: (Be Specific) Filter building										
Nature of Injuries <div style="display: flex; justify-content: space-between;"> <div> None <input checked="" type="checkbox"/> </div> <div> Thermal burn <input type="checkbox"/> </div> <div> Laceration <input type="checkbox"/> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> Fall <input type="checkbox"/> </div> <div> Chem. Burn <input type="checkbox"/> </div> <div> Other <input type="checkbox"/> </div> </div>										
Area affected <div style="display: flex; justify-content: space-between;"> <div> Eyes <input type="checkbox"/> </div> <div> Arms <input type="checkbox"/> </div> <div> Back <input type="checkbox"/> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> Face & Head <input type="checkbox"/> </div> <div> Hands <input type="checkbox"/> </div> <div> Legs <input type="checkbox"/> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> Neck <input type="checkbox"/> </div> <div> Chest <input type="checkbox"/> </div> <div> Feet <input type="checkbox"/> </div> </div>										
Do we Need? <div style="display: flex; justify-content: space-between;"> <div> Ambulance <input type="checkbox"/> </div> <div> Evacuation <input type="checkbox"/> </div> <div> ER Team <input type="checkbox"/> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> Other <input type="checkbox"/> </div> <div> None <input checked="" type="checkbox"/> </div> </div>										
Wind direction & Speed MPH <input type="text" value="0"/> Direction <input type="text"/>				<div style="text-align: center;"> 0 North Send to Zone 4 Send to Zone 1 270 West 90 East Send to Zone 3 Send to Zone 2 180 South </div>						
Filled out by: Tony Wuthrich				<div style="text-align: center;"> </div>						
Visual check:										

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 8/5/2008

TIME: 10:08

Revised 7/16/2008

ANSWERED:

Lab

☒

Safety

☒

Guard

☒

Name of person calling: Lee Kunz

Was 333 called?

Yes

☒

No

☐

Nature of Emergency:

Release Information: (In Gallons)

Accident

☐

Explosion

☐

Fire

☐

Release

☒

Amount Spilled

1000 gal.

Amount Contained

☐

Amount Not Contained

1000 gal.

Detailed Comments:
(Be Specific)

A 16" drisco pipe that was being used to transfer pond water to the enclosed loop system ruptured, spilling 1000 gallons of low pH water outside of the containment area.

Area of emergency:
(Be Specific)

The East side of the old phos acid plant.

Nature of Injuries

None

☒

Thermal burn

☐

Laceration

☐

Fall

☐

Chem. Burn

☐

Other

☐

Area affected

Eyes

☐

Arms

☐

Back

☐

Face & Head

☐

Hands

☐

Legs

☐

Neck

☐

Chest

☐

Feet

☐

Do we
Need?

Ambulance

☐

Evacuation

☐

ER Team

☐

Other

☐

None

☒

Wind
direction & Speed

MPH

7

Direction

S

Cross out area that the wind is coming from.
This will tell where to send the people to.

Send to Zone

No wind send to Zone 3

Filled out by: **Steve Moore**

Visual check: **North to South**

Send to Zone 4

270 West

Send to Zone 3

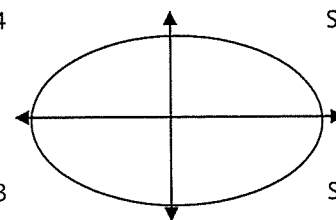
0 North

Send to Zone 1

90 East

Send to Zone 2

180 South



EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 8/29/2008

TIME: 10:59

Revised 7/16/2008

ANSWERED:		Lab <input checked="" type="checkbox"/>	Safety <input type="checkbox"/>	Guard <input checked="" type="checkbox"/>
Name of person calling: <u>Frank Moore</u>				
Was 333 called?				
Yes	<input checked="" type="checkbox"/>			
No	<input type="checkbox"/>			
Nature of Emergency:		Release Information: (In Gallons)		
Accident	<input type="checkbox"/>	Amount Spilled	<input type="text" value="250"/>	
Explosion	<input type="checkbox"/>	Amount Contained	<input type="text" value="250"/>	
Fire	<input type="checkbox"/>	Amount Not Contained	<input type="text"/>	
Release	<input checked="" type="checkbox"/>			
Detailed Comments: (Be Specific) <u>42% acid overflowed out of 42% clarifier onto ground. Incident happened on 8/6/2008</u>				
Area of emergency: (Be Specific) <u>Phos. Acid</u>				
Nature of Injuries				
None	<input checked="" type="checkbox"/>	Thermal burn	<input type="checkbox"/>	Laceration <input type="checkbox"/>
Fall	<input type="checkbox"/>	Chem. Burn	<input type="checkbox"/>	Other <input type="checkbox"/>
Area affected				
Eyes	<input type="checkbox"/>	Arms	<input type="checkbox"/>	Back <input type="checkbox"/>
Face & Head	<input type="checkbox"/>	Hands	<input type="checkbox"/>	Legs <input type="checkbox"/>
Neck	<input type="checkbox"/>	Chest	<input type="checkbox"/>	Feet <input type="checkbox"/>
Do we Need?				
Ambulance	<input type="checkbox"/>	Evacuation	<input type="checkbox"/>	ER Team <input type="checkbox"/>
Other	<input type="checkbox"/>	None	<input checked="" type="checkbox"/>	
Wind direction & Speed		<div style="text-align: center;"> <p>0 North</p> <p>270 West 90 East</p> <p>Send to Zone 4 Send to Zone 1</p> <p>Send to Zone 3 Send to Zone 2</p> <p>180 South</p> </div>		
MPH <input type="text"/>	Direction <input type="text"/>			
Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3				
Filled out by: <u>M. Martinez</u>				
Visual check:				

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 8/11/2008

TIME: 10:41

Revised 7/16/2008

ANSWERED:				Lab	<input checked="" type="checkbox"/>	Safety	<input type="checkbox"/>	Guard	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Name of person calling: <u>Clay Gentry</u>										
Was 333 called?										
Yes		<input checked="" type="checkbox"/>								
No		<input type="checkbox"/>								
Nature of Emergency:					Release Information: (In Gallons)					
Accident	<input type="checkbox"/>				Amount Spilled	<input type="text" value="30000"/>				
Explosion	<input type="checkbox"/>				Amount Contained	<input type="text"/>				
Fire	<input type="checkbox"/>				Amount Not Contained	<input type="text" value="10000"/>				
Release	<input checked="" type="checkbox"/> pond water & gyp									
Detailed Comments: (Be Specific) Expansion joint on Gyp disposal discharge valve blew releasing 30000 approx. gallons of Gyp and Pond water to building. Approx 10000 gal ran outside building toward E & I shop.										
Area of emergency: (Be Specific) <u>North end of Filter Building</u>										
Nature of Injuries										
None		<input checked="" type="checkbox"/>		Thermal burn		<input type="checkbox"/>		Laceration		<input type="checkbox"/>
Fall		<input type="checkbox"/>		Chem. Burn		<input type="checkbox"/>		Other		<input type="checkbox"/>
Area affected										
Eyes		<input type="checkbox"/>		Arms		<input type="checkbox"/>		Back		<input type="checkbox"/>
Face & Head		<input type="checkbox"/>		Hands		<input type="checkbox"/>		Legs		<input type="checkbox"/>
Neck		<input type="checkbox"/>		Chest		<input type="checkbox"/>		Feet		<input type="checkbox"/>
Do we Need?										
Ambulance		<input type="checkbox"/>		Evacuation		<input type="checkbox"/>		ER Team		<input type="checkbox"/>
Other		<input type="checkbox"/>		None		<input checked="" type="checkbox"/>				
Wind direction & Speed				<div style="text-align: center;"> <p>0 North</p> <p>270 West</p> <p>90 East</p> <p>180 South</p> </div>						
Cross out area that the wind is coming from. This will tell where to send the people to.										
Send to Zone <input type="text" value="3"/> No wind send to Zone 3										
Filled out by: Tony Wuthrich										
Visual check: yes										

NUW 006338

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 8/12/2008

TIME: 12:03

Revised 7/16/2008

ANSWERED:

Lab ☒

Safety ☐

Guard ☐

☒

Name of person calling: Ivan Williams

Was 333 called?

Yes

☒

No

☐

Nature of Emergency:

Release Information: (In Gallons)

Accident

☐

Explosion

☐

Fire

☐

Release

☒

Amount Spilled

5

Amount Contained

5

Amount Not Contained

Detailed Comments: 5 gal. of sufuric acid seeped out of a flange from a 90 degree elbow.
(Be Specific)

Area of emergency: East Sulfuric
(Be Specific)

Nature of Injuries

None

☒

Thermal burn

☐

Laceration

☐

Fall

☐

Chem. Burn

☐

Other

☐

Area affected

Eyes

☐

Arms

☐

Back

☐

Face & Head

☐

Hands

☐

Legs

☐

Neck

☐

Chest

☐

Feet

☐

Do we
Need?

Ambulance

☐

Evacuation

☐

ER Team

☐

Other

☐

None

☒

Wind direction & Speed

MPH

13

Direction

SW

Cross out area that the wind is coming from.
This will tell where to send the people to.

Send to Zone

No wind send to Zone 3

Filled out by: Matthew Martinez

Visual check: southwest to northeast

Send to Zone 4

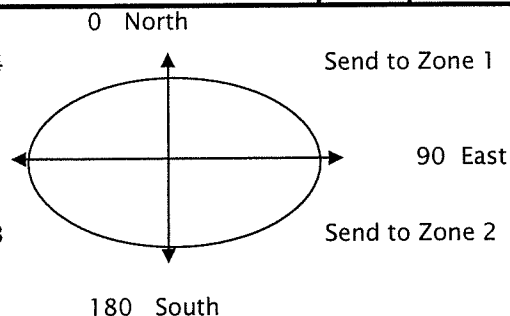
Send to Zone 1

270 West

90 East

Send to Zone 3

Send to Zone 2



EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 8/13/2008

TIME: 23:50

Revised 7/16/2008

ANSWERED:				<i>Lab</i>	<input checked="" type="checkbox"/>	<i>Safety</i>	<input type="checkbox"/>	<i>Guard</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Name of person calling: <u>Jeff Parker</u>										
Was 333 called? <div style="display: flex; justify-content: space-between; align-items: center;"> Yes <input checked="" type="checkbox"/> </div> <div style="display: flex; justify-content: space-between; align-items: center;"> No <input type="checkbox"/> </div>										
Nature of Emergency:					Release Information: (In Gallons)					
<div style="display: flex; justify-content: space-between;"> <div> Accident <input type="checkbox"/> Explosion <input type="checkbox"/> Fire <input type="checkbox"/> Release <input checked="" type="checkbox"/> </div> <div> Amount Spilled <input type="checkbox"/> Amount Contained <input type="checkbox"/> Amount Not Contained <input type="checkbox"/> </div> </div>					<div style="display: flex; justify-content: space-between;"> <div></div> <div> 1 gal 1 gal </div> </div>					
Detailed Comments: (Be Specific) <u>Starting up 93% system when a leak was discovered in a flange on the Acid Tank deck.</u>										
Area of emergency: (Be Specific) <u>East Sulfuric on Acid Tank deck</u>										
Nature of Injuries <div style="display: flex; justify-content: space-between; align-items: center;"> <div> <i>None</i> <input checked="" type="checkbox"/> </div> <div> <i>Thermal burn</i> <input type="checkbox"/> </div> <div> <i>Laceration</i> <input type="checkbox"/> </div> </div> <div style="display: flex; justify-content: space-between; align-items: center; margin-top: 5px;"> <div> <i>Fall</i> <input type="checkbox"/> </div> <div> <i>Chem. Burn</i> <input type="checkbox"/> </div> <div> <i>Other</i> <input type="checkbox"/> </div> </div>										
Area affected <div style="display: flex; justify-content: space-between; align-items: center;"> <div> <i>Eyes</i> <input type="checkbox"/> <i>Face & Head</i> <input type="checkbox"/> <i>Neck</i> <input type="checkbox"/> </div> <div> <i>Arms</i> <input type="checkbox"/> <i>Hands</i> <input type="checkbox"/> <i>Chest</i> <input type="checkbox"/> </div> <div> <i>Back</i> <input type="checkbox"/> <i>Legs</i> <input type="checkbox"/> <i>Feet</i> <input type="checkbox"/> </div> </div>										
Do we Need? <div style="display: flex; justify-content: space-between; align-items: center;"> <div> <i>Ambulance</i> <input type="checkbox"/> <i>Other</i> <input type="checkbox"/> </div> <div> <i>Evacuation</i> <input type="checkbox"/> </div> <div> <i>ER Team</i> <input type="checkbox"/> <i>None</i> <input checked="" type="checkbox"/> </div> </div>										
Wind direction & Speed <div style="display: flex; justify-content: space-between; align-items: center;"> <div> <i>MPH</i> <input type="text" value="0"/> </div> <div> <i>Direction</i> <input type="text"/> </div> </div> <p>Cross out area that the wind is coming from. This will tell where to send the people to.</p> <p>Send to Zone <input type="text"/> No wind send to Zone 3</p>					<div style="text-align: center;"> <p>0 North</p> <p>Send to Zone 4</p> <p>Send to Zone 1</p> <p>270 West</p> <p>90 East</p> <p>Send to Zone 3</p> <p>Send to Zone 2</p> <p>180 South</p> </div>					
Filled out by: <u>D Maughan</u>										
Visual check:										

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 8/13/2008

TIME: 4:05

Revised 7/16/2008

ANSWERED:		<i>Lab</i> <input checked="" type="checkbox"/>	<i>Safety</i> <input type="checkbox"/>	<i>Guard</i> <input checked="" type="checkbox"/>
Name of person calling: <u>Ross Loertcher</u>				
Was 333 called?				
Yes	<input checked="" type="checkbox"/>			
No	<input type="checkbox"/>			
Nature of Emergency:		Release Information: (In Gallons)		
Accident	<input type="checkbox"/>	Amount Spilled	<input type="text" value="400gal"/>	
Explosion	<input type="checkbox"/>	Amount Contained	<input type="text"/>	
Fire	<input type="checkbox"/>	Amount Not Contained	<input type="text" value="400gal"/>	
Release	<input checked="" type="checkbox"/>			
Detailed Comments: (Be Specific) <u>A pond water spill in the Filter Building caused by a level control malfunction.</u>				
Area of emergency: (Be Specific) <u>Filter building at Phos Acid</u>				
Nature of Injuries				
None	<input checked="" type="checkbox"/>	Thermal burn	<input type="checkbox"/>	Laceration <input type="checkbox"/>
Fall	<input type="checkbox"/>	Chem. Burn	<input type="checkbox"/>	Other <input type="checkbox"/>
Area affected				
Eyes	<input type="checkbox"/>	Arms	<input type="checkbox"/>	Back <input type="checkbox"/>
Face & Head	<input type="checkbox"/>	Hands	<input type="checkbox"/>	Legs <input type="checkbox"/>
Neck	<input type="checkbox"/>	Chest	<input type="checkbox"/>	Feet <input type="checkbox"/>
Do we Need?				
Ambulance	<input type="checkbox"/>	Evacuation	<input type="checkbox"/>	ER Team <input type="checkbox"/>
Other	<input type="checkbox"/>	None	<input checked="" type="checkbox"/>	
Wind direction & Speed		<div style="text-align: center;"> <p>0 North</p> <p>Send to Zone 4 Send to Zone 1</p> <p>270 West 90 East</p> <p>Send to Zone 3 Send to Zone 2</p> <p>180 South</p> </div>		
MPH <input type="text" value="0"/> Direction <input type="text"/>				
Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3				
Filled out by: <u>D Maughan</u>				
Visual check:				

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 8/21/2007

TIME: 13:04

Revised 7/16/2008

ANSWERED:		Lab	<input checked="" type="checkbox"/>	Safety	<input checked="" type="checkbox"/>	Guard	<input checked="" type="checkbox"/>
Name of person calling: <u>Doug Graunke</u>							
Was 333 called?							
Yes		<input checked="" type="checkbox"/>					
No		<input type="checkbox"/>					
Nature of Emergency:				Release Information: (In Gallons)			
Accident	<input type="checkbox"/>	Amount Spilled	<input type="text" value="5000 gal"/>				
Explosion	<input type="checkbox"/>	Amount Contained	<input type="text"/>				
Fire	<input type="checkbox"/>	Amount Not Contained	<input type="text" value="5000 gal"/>				
Release	<input checked="" type="checkbox"/>						
Detailed Comments: (Be Specific)		Pond water leaking out of containment by the decant ditch at the Gyp Pond.					
Area of emergency: (Be Specific)		Decant ditch at the Gyp Pond					
Nature of Injuries		None	<input checked="" type="checkbox"/>	Thermal burn	<input type="checkbox"/>	Laceration	<input type="checkbox"/>
		Fall	<input type="checkbox"/>	Chem. Burn	<input type="checkbox"/>	Other	<input type="checkbox"/>
Area affected		Eyes	<input type="checkbox"/>	Arms	<input type="checkbox"/>	Back	<input type="checkbox"/>
		Face & Head	<input type="checkbox"/>	Hands	<input type="checkbox"/>	Legs	<input type="checkbox"/>
		Neck	<input type="checkbox"/>	Chest	<input type="checkbox"/>	Feet	<input type="checkbox"/>
Do we Need?		Ambulance	<input type="checkbox"/>	Evacuation	<input type="checkbox"/>	ER Team	<input type="checkbox"/>
		Other	<input type="checkbox"/>	None <input checked="" type="checkbox"/>			
Wind direction & Speed		<div style="display: flex; justify-content: space-between;"> <div> MPH <input type="text" value="12"/> Direction <input type="text" value="S to N"/> </div> <div> 0 North 270 West 180 South 90 East </div> </div> <p>Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3</p>					
Filled out by:		D Maughan					
Visual check:		<div style="display: flex; justify-content: space-between;"> <div>Send to Zone 4</div> <div>Send to Zone 1</div> </div> <div style="display: flex; justify-content: space-between;"> <div>Send to Zone 3</div> <div>Send to Zone 2</div> </div>					

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 9/4/2008

TIME: 17:20

Revised 7/16/2008

ANSWERED:			
<i>Lab</i> <input checked="" type="checkbox"/>	<i>Safety</i> <input type="checkbox"/>	<i>Guard</i> <input checked="" type="checkbox"/>	
Name of person calling: <u>Don Lyman</u>			
Was 333 called?			
Yes	<input checked="" type="checkbox"/>		
No	<input type="checkbox"/>		
Nature of Emergency:		Release Information: (In Gallons)	
Accident	<input type="checkbox"/>	Amount Spilled	<input type="text" value="350 gal"/>
Explosion	<input type="checkbox"/>	Amount Contained	<input type="text" value="350 gal"/>
Fire	<input type="checkbox"/>	Amount Not Contained	<input type="text"/>
Release	<input checked="" type="checkbox"/>		
Detailed Comments: <u>The launder on North 30% Clarifier over flowed.</u> (Be Specific)			
Area of emergency: <u>West Phos Acid plant.</u> (Be Specific)			
Nature of Injuries			
None	<input checked="" type="checkbox"/>	Thermal burn	<input type="checkbox"/>
Laceration	<input type="checkbox"/>	Fall	<input type="checkbox"/>
Chem. Burn	<input type="checkbox"/>	Other	<input type="checkbox"/>
Area affected			
Eyes	<input type="checkbox"/>	Arms	<input type="checkbox"/>
Face & Head	<input type="checkbox"/>	Hands	<input type="checkbox"/>
Neck	<input type="checkbox"/>	Chest	<input type="checkbox"/>
Legs	<input type="checkbox"/>	Feet	<input type="checkbox"/>
Do we Need?			
Ambulance	<input type="checkbox"/>	Evacuation	<input type="checkbox"/>
ER Team	<input type="checkbox"/>	Other	<input type="checkbox"/>
None	<input checked="" type="checkbox"/>		
Wind direction & Speed		<div style="text-align: center;"> <p>0 North</p> <p>Send to Zone 4 Send to Zone 1</p> <p>270 West 90 East</p> <p>Send to Zone 3 Send to Zone 2</p> <p>180 South</p> </div>	
MPH <input type="text" value="10"/>	Direction <input type="text" value="west"/>		
Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3			
Filled out by: <u>D Maughan</u>			
Visual check:			

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 9/7/2008

TIME: 14:50

Revised 7/16/2008

ANSWERED:		Lab	<input checked="" type="checkbox"/>	Safety	<input type="checkbox"/>	Guard	<input checked="" type="checkbox"/>
Name of person calling: <u>Kurt Lewis</u>							
Was 333 called?							
Yes		<input checked="" type="checkbox"/>					
No		<input type="checkbox"/>					
Nature of Emergency:				Release Information: (In Gallons)			
Accident	<input type="checkbox"/>	Amount Spilled	<input type="text" value="30"/>				
Explosion	<input type="checkbox"/>	Amount Contained	<input type="text" value="30"/>				
Fire	<input type="checkbox"/>	Amount Not Contained	<input type="text"/>				
Release	<input checked="" type="checkbox"/>						
Detailed Comments: (Be Specific)		Operator started filling a tank car without the spout in it and spilled 70% SPA onto the ground					
Area of emergency: (Be Specific)							
SPA							
Nature of Injuries		None	<input checked="" type="checkbox"/>	Thermal burn	<input type="checkbox"/>	Laceration	<input type="checkbox"/>
		Fall	<input type="checkbox"/>	Chem. Burn	<input type="checkbox"/>	Other	<input type="checkbox"/>
Area affected		Eyes	<input type="checkbox"/>	Arms	<input type="checkbox"/>	Back	<input type="checkbox"/>
		Face & Head	<input type="checkbox"/>	Hands	<input type="checkbox"/>	Legs	<input type="checkbox"/>
		Neck	<input type="checkbox"/>	Chest	<input type="checkbox"/>	Feet	<input type="checkbox"/>
Do we Need?		Ambulance	<input type="checkbox"/>	Evacuation	<input type="checkbox"/>	ER Team	<input type="checkbox"/>
		Other	<input type="checkbox"/>	None	<input checked="" type="checkbox"/>		
Wind direction & Speed		<div style="text-align: center;"> <p>0 North</p> <p>270 West</p> <p>90 East</p> <p>180 South</p> </div>					
Cross out area that the wind is coming from. This will tell where to send the people to.							
Send to Zone							
No wind send to Zone 3							
Filled out by:		M Martinez					
Visual check:		west to east					

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 9/7/2008

TIME: 2:00

Revised 7/16/2008

ANSWERED:		<i>Lab</i>	<input checked="" type="checkbox"/>	<i>Safety</i>	<input type="checkbox"/>	<i>Guard</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Name of person calling: <u>Frank Moore</u>								
Was 333 called?								
Yes		<input checked="" type="checkbox"/>						
No		<input type="checkbox"/>						
Nature of Emergency:				Release Information: (In Gallons)				
Accident	<input type="checkbox"/>	Amount Spilled		<input type="text" value="2000 gal"/>				
Explosion	<input type="checkbox"/>	Amount Contained		<input type="text" value="2000 gal"/>				
Fire	<input type="checkbox"/>	Amount Not Contained		<input type="text"/>				
Release	<input checked="" type="checkbox"/>							
Detailed Comments: (Be Specific)		Tk 13 has a hole in the side near the bottom of the tk and is releasing condensate and phos acid residue into containment.						
Area of emergency: (Be Specific)		Tk 13 Phos Acid						
Nature of Injuries		None	<input checked="" type="checkbox"/>	Thermal burn	<input type="checkbox"/>	Laceration	<input type="checkbox"/>	
		Fall	<input type="checkbox"/>	Chem. Burn	<input type="checkbox"/>	Other	<input type="checkbox"/>	
Area affected		Eyes	<input type="checkbox"/>	Arms	<input type="checkbox"/>	Back	<input type="checkbox"/>	
		Face & Head	<input type="checkbox"/>	Hands	<input type="checkbox"/>	Legs	<input type="checkbox"/>	
		Neck	<input type="checkbox"/>	Chest	<input type="checkbox"/>	Feet	<input type="checkbox"/>	
Do we Need?		Ambulance	<input type="checkbox"/>	Evacuation	<input type="checkbox"/>	ER Team	<input type="checkbox"/>	
		Other	<input type="checkbox"/>			None	<input checked="" type="checkbox"/>	
Wind direction & Speed		<div style="text-align: center;"> <p>0 North</p> <p>270 West 90 East</p> <p>Send to Zone 4 Send to Zone 1</p> <p>Send to Zone 3 Send to Zone 2</p> <p>180 South</p> </div>						
MPH <input type="text" value="2"/> Direction <input checked="" type="checkbox"/> East								
Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3								
Filled out by: Howard Johnson								
Visual check: East to West								

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 9/10/2008

TIME: 9:53

Revised 7/16/2008

ANSWERED:				<i>Lab</i>	<input checked="" type="checkbox"/>	<i>Safety</i>	<input checked="" type="checkbox"/>	<i>Guard</i>	<input checked="" type="checkbox"/>
Name of person calling: <u>Dale Humpherys</u>									
Was 333 called? <div style="display: flex; justify-content: space-between;"> Yes <input checked="" type="checkbox"/> </div> <div style="display: flex; justify-content: space-between;"> No <input type="checkbox"/> </div>									
Nature of Emergency:					Release Information: (In Gallons)				
<div style="display: flex;"> <div style="flex: 1;"> Accident <input type="checkbox"/> Explosion <input type="checkbox"/> Fire <input type="checkbox"/> Release <input checked="" type="checkbox"/> </div> <div style="flex: 1;"> Amount Spilled <input type="text" value="30"/> Amount Contained <input type="text"/> Amount Not Contained <input type="text" value="30"/> </div> </div>									
Detailed Comments: <u>A leaking valve in gyp line spilled onto asphalt.</u> (Be Specific)									
Area of emergency: <u>Phos. Acid</u> (Be Specific)									
Nature of Injuries <div style="display: flex; justify-content: space-between;"> <div> <i>None</i> <input checked="" type="checkbox"/> </div> <div> <i>Thermal burn</i> <input type="checkbox"/> </div> <div> <i>Laceration</i> <input type="checkbox"/> </div> </div> <div style="display: flex; justify-content: space-between;"> <div> <i>Fall</i> <input type="checkbox"/> </div> <div> <i>Chem. Burn</i> <input type="checkbox"/> </div> <div> <i>Other</i> <input type="checkbox"/> </div> </div>									
Area affected <div style="display: flex; justify-content: space-between;"> <div> <i>Eyes</i> <input type="checkbox"/> <i>Face & Head</i> <input type="checkbox"/> <i>Neck</i> <input type="checkbox"/> </div> <div> <i>Arms</i> <input type="checkbox"/> <i>Hands</i> <input type="checkbox"/> <i>Chest</i> <input type="checkbox"/> </div> <div> <i>Back</i> <input type="checkbox"/> <i>Legs</i> <input type="checkbox"/> <i>Feet</i> <input type="checkbox"/> </div> </div>									
Do we Need? <div style="display: flex; justify-content: space-between;"> <div> <i>Ambulance</i> <input type="checkbox"/> <i>Other</i> <input type="checkbox"/> </div> <div> <i>Evacuation</i> <input type="checkbox"/> <i>None</i> <input checked="" type="checkbox"/> </div> <div> <i>ER Team</i> <input type="checkbox"/> </div> </div>									
Wind direction & Speed MPH <u>14</u> Direction <u>So.</u> Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone <input type="text"/> No wind send to Zone 3					<div style="text-align: center;"> <p>0 North</p> <p>180 South</p> </div>				
Filled out by: <u>M. Martinez</u>									
Visual check: <u>So. To No.</u>									

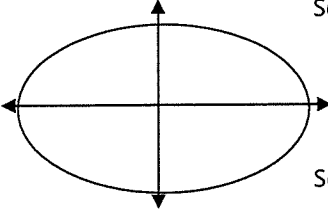
EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 9/24/2008

TIME: 6:00

Revised 7/16/2008

ANSWERED:		<i>Lab</i>	<input checked="" type="checkbox"/>	<i>Safety</i>	<input type="checkbox"/>	<i>Guard</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Name of person calling: <u>Clair Christensen</u>										
Was 333 called?										
Yes		<input checked="" type="checkbox"/>								
No		<input type="checkbox"/>								
Nature of Emergency:				Release Information: (In Gallons)						
Accident		<input type="checkbox"/>		Amount Spilled		<input type="text" value="20"/>				
Explosion		<input type="checkbox"/>		Amount Contained		<input type="text"/>				
Fire		<input type="checkbox"/>		Amount Not Contained		<input type="text" value="20"/>				
Release		<input checked="" type="checkbox"/>								
Detailed Comments: (Be Specific)				Grade control boil out water from #1 SPA Unit leaked from the oxidation Tk to the cooler feed pump						
Area of emergency: (Be Specific)				Phos @ grade control						
Nature of Injuries										
None			<input checked="" type="checkbox"/>	Thermal burn		<input type="checkbox"/>		Laceration <input type="checkbox"/>		
Fall			<input type="checkbox"/>	Chem. Burn		<input type="checkbox"/>		Other <input type="checkbox"/>		
Area affected										
Eyes			<input type="checkbox"/>	Arms		<input type="checkbox"/>		Back <input type="checkbox"/>		
Face & Head			<input type="checkbox"/>	Hands		<input type="checkbox"/>		Legs <input type="checkbox"/>		
Neck			<input type="checkbox"/>	Chest		<input type="checkbox"/>		Feet <input type="checkbox"/>		
Do we Need?										
Ambulance			<input type="checkbox"/>	Evacuation		<input type="checkbox"/>		ER Team <input type="checkbox"/>		
Other			<input type="checkbox"/>			None		<input checked="" type="checkbox"/>		
Wind direction & Speed				<div style="text-align: center;"><p>0 North</p><p>270 West</p><p>90 East</p><p>180 South</p></div>						
MPH		<input type="text" value="0"/>	Direction						<input type="text"/>	
Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone <input type="text"/> No wind send to Zone 3										
Filled out by: J Kennedy										
Visual check:										

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 9/26/2008

TIME: 10:00

Revised 7/16/2008

ANSWERED:				<i>Lab</i>	<input checked="" type="checkbox"/>	<i>Safety</i>	<input checked="" type="checkbox"/>	<i>Guard</i>	<input checked="" type="checkbox"/>	
Name of person calling: <u>Randy Smith</u>										
Was 333 called? <div style="display: flex; justify-content: space-between;"> <div> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> </div> </div>										
Nature of Emergency:					Release Information: (In Gallons)					
<div style="display: flex;"> <div style="flex: 1;"> Accident <input type="checkbox"/> Explosion <input type="checkbox"/> Fire <input type="checkbox"/> Release <input checked="" type="checkbox"/> </div> <div style="flex: 1;"> Amount Spilled <input type="text" value="50 gal"/> Amount Contained <input type="text" value="50 gal"/> Amount Not Contained <input type="text"/> </div> </div>										
Detailed Comments: (Be Specific) An expansion joint on the granulation feed pump ruptured and released slurry into containment.										
Area of emergency: (Be Specific) Granulation										
Nature of Injuries <div style="display: flex; justify-content: space-between;"> <div> <i>None</i> <input checked="" type="checkbox"/> </div> <div> <i>Thermal burn</i> <input type="checkbox"/> </div> <div> <i>Laceration</i> <input type="checkbox"/> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> <i>Fall</i> <input type="checkbox"/> </div> <div> <i>Chem. Burn</i> <input type="checkbox"/> </div> <div> <i>Other</i> <input type="checkbox"/> </div> </div>										
Area affected <div style="display: flex; justify-content: space-between;"> <div> <i>Eyes</i> <input type="checkbox"/> <i>Face & Head</i> <input type="checkbox"/> <i>Neck</i> <input type="checkbox"/> </div> <div> <i>Arms</i> <input type="checkbox"/> <i>Hands</i> <input type="checkbox"/> <i>Chest</i> <input type="checkbox"/> </div> <div> <i>Back</i> <input type="checkbox"/> <i>Legs</i> <input type="checkbox"/> <i>Feet</i> <input type="checkbox"/> </div> </div>										
Do we Need? <div style="display: flex; justify-content: space-between;"> <div> <i>Ambulance</i> <input type="checkbox"/> <i>Other</i> <input type="checkbox"/> </div> <div> <i>Evacuation</i> <input type="checkbox"/> </div> <div> <i>ER Team</i> <input type="checkbox"/> <i>None</i> <input checked="" type="checkbox"/> </div> </div>										
Wind direction & Speed MPH <input type="text" value="0"/> Direction <input type="text" value="0. East"/> Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone 3 No wind send to Zone 3					<div style="text-align: center;"> <p>0 North</p> <p>270 West 90 East</p> <p>180 South</p> </div>					
Filled out by: Howard Johnson										
Visual check: East to West										

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 9/28/2008

TIME: 0:00

Revised 7/16/2008

ANSWERED:		Lab <input checked="" type="checkbox"/>	Safety <input type="checkbox"/>	Guard <input checked="" type="checkbox"/>	<input type="checkbox"/>
Name of person calling: <u>Tim Gains</u>					
Was 333 called?					
Yes		<input checked="" type="checkbox"/>			
No		<input type="checkbox"/>			
Nature of Emergency:			Release Information: (In Gallons)		
			sulfuric acid		
Accident	<input type="checkbox"/>	Amount Spilled	<input type="text" value="5 gal"/>		
Explosion	<input type="checkbox"/>	Amount Contained	<input type="text" value="5 gal"/>		
Fire	<input type="checkbox"/>	Amount Not Contained	<input type="text"/>		
Release	<input checked="" type="checkbox"/>				
Detailed Comments: (Be Specific)		There is a pin hole in the sulfuric acid line to the Granulation scrubber tank and 5gallons of sulfuric acid spilled in to containment.			
Area of emergency: (Be Specific)		Granulation			
Nature of Injuries		None <input checked="" type="checkbox"/>	Thermal burn <input type="checkbox"/>	Laceration <input type="checkbox"/>	
		Fall <input type="checkbox"/>	Chem. Burn <input type="checkbox"/>	Other <input type="checkbox"/>	
Area affected		Eyes <input type="checkbox"/>	Arms <input type="checkbox"/>	Back <input type="checkbox"/>	
		Face & Head <input type="checkbox"/>	Hands <input type="checkbox"/>	Legs <input type="checkbox"/>	
		Neck <input type="checkbox"/>	Chest <input type="checkbox"/>	Feet <input type="checkbox"/>	
Do we Need?		Ambulance <input type="checkbox"/>	Evacuation <input type="checkbox"/>	ER Team <input type="checkbox"/>	
		Other <input type="checkbox"/>	None <input checked="" type="checkbox"/>		
Wind direction & Speed		<div style="text-align: center;"> <p>0 North</p> <p>Send to Zone 4 x Send to Zone 1</p> <p>270 West 90 East</p> <p>Send to Zone 3 Send to Zone 2</p> <p>180 South</p> </div>			
Cross out area that the wind is coming from. This will tell where to send the people to.					
Send to Zone <input type="text" value="4"/> No wind send to Zone 3					
Filled out by: <u>Howard Johnson</u>					
Visual check: <u>North to South</u>					

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 10/4/2008

TIME: 8:00

Revised 7/16/2008

ANSWERED:		Lab	<input checked="" type="checkbox"/>	Safety	<input type="checkbox"/>	Guard	<input checked="" type="checkbox"/>
Name of person calling: <u>Shawn Davis</u>							
Was 333 called? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>							
Nature of Emergency:				Release Information: (In Gallons)			
Accident	<input type="checkbox"/>	Amount Spilled	<input type="checkbox"/>	100			
Explosion	<input type="checkbox"/>	Amount Contained	<input type="checkbox"/>	100			
Fire	<input type="checkbox"/>	Amount Not Contained	<input type="checkbox"/>				
Release	<input checked="" type="checkbox"/>						
Detailed Comments: (Be Specific)		An expansion joint blew on PCR pump. Spilling app. 100 gallons of 42%phos acid.					
Area of emergency: (Be Specific)		Granulation plant at the bottom of preneut tank.					
Nature of Injuries		None	<input checked="" type="checkbox"/>	Thermal burn	<input type="checkbox"/>	Laceration	<input type="checkbox"/>
		Fall	<input type="checkbox"/>	Chem. Burn	<input type="checkbox"/>	Other	<input type="checkbox"/>
Area affected		Eyes	<input type="checkbox"/>	Arms	<input type="checkbox"/>	Back	<input type="checkbox"/>
		Face & Head	<input type="checkbox"/>	Hands	<input type="checkbox"/>	Legs	<input type="checkbox"/>
		Neck	<input type="checkbox"/>	Chest	<input type="checkbox"/>	Feet	<input type="checkbox"/>
Do we Need?		Ambulance	<input type="checkbox"/>	Evacuation	<input type="checkbox"/>	ER Team	<input type="checkbox"/>
		Other	<input type="checkbox"/>	None <input checked="" type="checkbox"/>			
Wind direction & Speed MPH <input type="text" value="0"/> Direction <input type="text"/> Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3		<div style="text-align: center;"> <p>0 North</p> <p>Send to Zone 4</p> <p>Send to Zone 1</p> <p>270 West</p> <p>90 East</p> <p>Send to Zone 3</p> <p>Send to Zone 2</p> <p>180 South</p> </div>					
Filled out by: Daren Maughan							
Visual check:							

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 10/4/2008

TIME: 2:30

Revised 7/16/2008

ANSWERED:				Lab	<input checked="" type="checkbox"/>	Safety	<input type="checkbox"/>	Guard	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Name of person calling: <u>Ivan Williams</u>										
Was 333 called?										
Yes		<input checked="" type="checkbox"/>								
No		<input type="checkbox"/>								
Nature of Emergency:					Release Information: (In Gallons)					
Accident		<input type="checkbox"/>			Amount Spilled			<input type="text" value="3 gal"/>		
Explosion		<input type="checkbox"/>			Amount Contained			<input type="text" value="3 gal"/>		
Fire		<input type="checkbox"/>			Amount Not Contained			<input type="text"/>		
Release		<input checked="" type="checkbox"/>								
Detailed Comments: <u>Sodium Hydroxide was spilled in containment at east sulfuric.</u> (Be Specific)										
Area of emergency: <u>East Sulfuric north east of the utility building.</u> (Be Specific)										
Nature of Injuries										
None		<input checked="" type="checkbox"/>		Thermal burn		<input type="checkbox"/>		Laceration		<input type="checkbox"/>
Fall		<input type="checkbox"/>		Chem. Burn		<input type="checkbox"/>		Other		<input type="checkbox"/>
Area affected										
Eyes		<input type="checkbox"/>		Arms		<input type="checkbox"/>		Back		<input type="checkbox"/>
Face & Head		<input type="checkbox"/>		Hands		<input type="checkbox"/>		Legs		<input type="checkbox"/>
Neck		<input type="checkbox"/>		Chest		<input type="checkbox"/>		Feet		<input type="checkbox"/>
Do we Need?										
Ambulance		<input type="checkbox"/>		Evacuation		<input type="checkbox"/>		ER Team		<input type="checkbox"/>
Other		<input type="checkbox"/>		None		<input checked="" type="checkbox"/>				
Wind direction & Speed				<div style="display: flex; justify-content: space-between;"> <div> MPH <input type="text" value="18"/> Direction <input type="text" value="0. East"/> <p>Cross out area that the wind is coming from. This will tell where to send the people to.</p> <p>Send to Zone No wind send to Zone 3</p> </div> <div> <div style="text-align: center;"> 0 North 180 South </div> </div> </div>						
Filled out by:				Howard Johnson Send to Zone 4 Send to Zone 1 Send to Zone 2 x						
Visual check:				Southeast to northwest						

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 10/16/2008

TIME: 10:15

Revised 7/16/2008

ANSWERED:		<i>Lab</i>	<input checked="" type="checkbox"/>	<i>Safety</i>	<input checked="" type="checkbox"/>	<i>Guard</i>	<input checked="" type="checkbox"/>
Name of person calling: <u>Shane Passey</u>							
Was 333 called? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>							
Nature of Emergency:				Release Information: (In Gallons)			
Accident	<input type="checkbox"/>	Amount Spilled	<input type="text" value="500"/>				
Explosion	<input type="checkbox"/>	Amount Contained	<input type="text" value="500"/>				
Fire	<input type="checkbox"/>	Amount Not Contained	<input type="text"/>				
Release	<input checked="" type="checkbox"/>						
Detailed Comments: (Be Specific) The East Slufuric control room lost electrical power, and the operators were not able to isolate all of the block valves before the #1 98% sulfuric tank overflowed. All spilled acid went into the containment area.							
Area of emergency: (Be Specific) #1 98% Sulfuric Acid storage tank.							
Nature of Injuries							
None		<input checked="" type="checkbox"/>	Thermal burn		<input type="checkbox"/>	Laceration <input type="checkbox"/>	
Fall		<input type="checkbox"/>	Chem. Burn		<input type="checkbox"/>	Other <input type="checkbox"/>	
Area affected							
Eyes		<input type="checkbox"/>	Arms		<input type="checkbox"/>	Back <input type="checkbox"/>	
Face & Head		<input type="checkbox"/>	Hands		<input type="checkbox"/>	Legs <input type="checkbox"/>	
Neck		<input type="checkbox"/>	Chest		<input type="checkbox"/>	Feet <input type="checkbox"/>	
Do we Need?							
Ambulance		<input type="checkbox"/>	Evacuation		<input type="checkbox"/>	ER Team <input type="checkbox"/>	
Other		<input type="checkbox"/>			None		<input checked="" type="checkbox"/>
Wind direction & Speed MPH <input type="text" value="5"/> Direction <input type="text" value="S"/> Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3			<div style="text-align: center;"> <p>0 North</p> <p>270 West 90 East</p> <p>180 South</p> </div>				
Filled out by: Steve Moore							
Visual check: South to North							

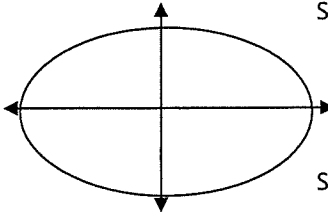
EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 10/16/2008

TIME: 5:20

Revised 7/16/2008

ANSWERED:			
<i>Lab</i>	<input checked="" type="checkbox"/>	<i>Safety</i>	<input type="checkbox"/>
<i>Guard</i>	<input checked="" type="checkbox"/>		
Name of person calling: <u>John Winmill</u>			
Was 333 called?			
Yes	<input checked="" type="checkbox"/>		
No	<input type="checkbox"/>		
Nature of Emergency:		Release Information: (In Gallons)	
Accident	<input type="checkbox"/>	Amount Spilled	7000 gal
Explosion	<input type="checkbox"/>	Amount Contained	7000 gal
Fire	<input type="checkbox"/>	Amount Not Contained	0
Release	<input checked="" type="checkbox"/>		
Detailed Comments: (Be Specific) While starting up pond water system, Phos ran the North Seal tank over as return line wouldn't take water			
Area of emergency: (Be Specific) North end of the Phos building by scrubbers. ie mushroom alley			
Nature of Injuries			
None	<input checked="" type="checkbox"/>	Thermal burn	<input type="checkbox"/>
Fall	<input type="checkbox"/>	Chem. Burn	<input type="checkbox"/>
Laceration	<input type="checkbox"/>	Other	<input type="checkbox"/>
Area affected			
Eyes	<input type="checkbox"/>	Arms	<input type="checkbox"/>
Face & Head	<input type="checkbox"/>	Hands	<input type="checkbox"/>
Neck	<input type="checkbox"/>	Chest	<input type="checkbox"/>
Back	<input type="checkbox"/>	Legs	<input type="checkbox"/>
Feet	<input type="checkbox"/>		
Do we Need?			
Ambulance	<input type="checkbox"/>	Evacuation	<input type="checkbox"/>
ER Team	<input type="checkbox"/>	Other	<input type="checkbox"/>
None	<input checked="" type="checkbox"/>		
Wind direction & Speed		<div style="text-align: center;">0 North</div> <div style="text-align: center;">Send to Zone 4 Send to Zone 1</div> <div style="text-align: center;">270 West 90 East</div> <div style="text-align: center;">Send to Zone 3 Send to Zone 2</div> <div style="text-align: center;">180 South</div> 	
MPH <input type="text" value="0"/> Direction <input type="text"/>			
Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3			
Filled out by: Tony Wuthrich			
Visual check:			

NUW 006353

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 10/20/2008

TIME: 13:40

Revised 7/16/2008

ANSWERED:				Lab	<input checked="" type="checkbox"/>	Safety	<input type="checkbox"/>	Guard	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Name of person calling: <u>Cody Muir</u>										
Was 333 called? Yes <input checked="" type="checkbox"/> <input type="checkbox"/> No <input type="checkbox"/>										
Nature of Emergency:					Release Information: (In Gallons)					
Accident <input type="checkbox"/> Explosion <input type="checkbox"/> Fire <input type="checkbox"/> Release <input checked="" type="checkbox"/>					Amount Spilled <input type="text" value="50"/> Amount Contained <input type="text"/> Amount Not Contained <input type="text" value="50"/>					
Detailed Comments: (Be Specific)					Pond water leak from a blown cake wash line in the Filter Building at Phos Acid.					
Area of emergency: (Be Specific)					Northeast corner of Filter Building.					
Nature of Injuries					None <input checked="" type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration <input type="checkbox"/> Fall <input type="checkbox"/> Chem. Burn <input type="checkbox"/> Other <input type="checkbox"/>					
Area affected					Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back <input type="checkbox"/> Face & Head <input type="checkbox"/> Hands <input type="checkbox"/> Legs <input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet <input type="checkbox"/>					
Do we Need?					Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> ER Team <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/>					
Wind MPH <input type="text" value="15"/> Direction <input type="text" value="SW"/> direction & Speed Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone <input type="text"/> No wind send to Zone 3					<div style="text-align: center;"> 0 North Send to Zone 4 Send to Zone 1 270 West Send to Zone 3 Send to Zone 2 180 South 90 East </div>					
Filled out by: Daren Maughan										
Visual check:										

NUW 006354

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 10/21/2008

TIME: 19:12

Revised 7/16/2008

ANSWERED:		Lab <input checked="" type="checkbox"/>	Safety <input type="checkbox"/>	Guard <input checked="" type="checkbox"/>
Name of person calling: <u>Frank Moore</u>				
Was 333 called?				
Yes	<input checked="" type="checkbox"/>			
No	<input type="checkbox"/>			
Nature of Emergency:		Release Information: (In Gallons)		
Accident	<input type="checkbox"/>	Amount Spilled	<input type="text" value="150 gal"/>	
Explosion	<input type="checkbox"/>	Amount Contained	<input type="text"/>	
Fire	<input type="checkbox"/>	Amount Not Contained	<input type="text" value="150 gal"/>	
Release	<input checked="" type="checkbox"/>			
Detailed Comments: (Be Specific)		Tank 12 south discharge pump line to PPA split and sprayed 30% Phosphoric acid on the ground out of containment.		
Area of emergency: (Be Specific)		Phos Acid tank 12.		
Nature of Injuries		None <input checked="" type="checkbox"/>	Thermal burn <input type="checkbox"/>	Laceration <input type="checkbox"/>
		Fall <input type="checkbox"/>	Chem. Burn <input type="checkbox"/>	Other <input type="checkbox"/>
Area affected		Eyes <input type="checkbox"/>	Arms <input type="checkbox"/>	Back <input type="checkbox"/>
		Face & Head <input type="checkbox"/>	Hands <input type="checkbox"/>	Legs <input type="checkbox"/>
		Neck <input type="checkbox"/>	Chest <input type="checkbox"/>	Feet <input type="checkbox"/>
Do we Need?		Ambulance <input type="checkbox"/>	Evacuation <input type="checkbox"/>	ER Team <input type="checkbox"/>
		Other <input type="checkbox"/>	None <input checked="" type="checkbox"/>	
Wind direction & Speed		<div style="text-align: center;"> <p>0 North</p> <p>270 West</p> <p>90 East</p> <p>180 South</p> </div>		
MPH <input type="text" value="6"/> Direction <input type="text" value="Northwest"/>				
Cross out area that the wind is coming from. This will tell where to send the people to.				
Send to Zone <input type="text" value="4"/> No wind send to Zone 3				
Filled out by:		Howard Johnson		
Visual check:		Northwest to Southeast		

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 10/24/2008

TIME: 21:25

Revised 7/16/2008

ANSWERED:				<i>Lab</i>	<input checked="" type="checkbox"/>	<i>Safety</i>	<input type="checkbox"/>	<i>Guard</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Name of person calling: <u>Rodney Peterson</u>										
Was 333 called? <div style="display: flex; justify-content: space-between; align-items: center;"> Yes <input checked="" type="checkbox"/> </div> <div style="display: flex; justify-content: space-between; align-items: center;"> No <input type="checkbox"/> </div>										
Nature of Emergency:					Release Information: (In Gallons)					
<div style="display: flex; justify-content: space-between;"> <div> Accident <input type="checkbox"/> Explosion <input type="checkbox"/> Fire <input type="checkbox"/> Release <input checked="" type="checkbox"/> </div> <div> Amount Spilled <input type="text" value="400"/> Amount Contained <input type="text"/> Amount Not Contained <input type="text" value="400"/> </div> </div>										
Detailed Comments: <u>Expansion joint on 24C feed pump leaked slurry</u> (Be Specific)										
Area of emergency: <u>Phos Filter</u> (Be Specific)										
Nature of Injuries <div style="display: flex; justify-content: space-between;"> <div> <i>None</i> <input checked="" type="checkbox"/> <i>Thermal burn</i> <input type="checkbox"/> </div> <div> <i>Laceration</i> <input type="checkbox"/> </div> </div> <div style="display: flex; justify-content: space-between;"> <div> <i>Fall</i> <input type="checkbox"/> </div> <div> <i>Chem. Burn</i> <input type="checkbox"/> </div> <div> <i>Other</i> <input type="checkbox"/> </div> </div>										
Area affected <div style="display: flex; justify-content: space-between;"> <div> <i>Eyes</i> <input type="checkbox"/> </div> <div> <i>Arms</i> <input type="checkbox"/> </div> <div> <i>Back</i> <input type="checkbox"/> </div> </div> <div style="display: flex; justify-content: space-between;"> <div> <i>Face & Head</i> <input type="checkbox"/> </div> <div> <i>Hands</i> <input type="checkbox"/> </div> <div> <i>Legs</i> <input type="checkbox"/> </div> </div> <div style="display: flex; justify-content: space-between;"> <div> <i>Neck</i> <input type="checkbox"/> </div> <div> <i>Chest</i> <input type="checkbox"/> </div> <div> <i>Feet</i> <input type="checkbox"/> </div> </div>										
Do we Need? <div style="display: flex; justify-content: space-between;"> <div> <i>Ambulance</i> <input type="checkbox"/> </div> <div> <i>Evacuation</i> <input type="checkbox"/> </div> <div> <i>ER Team</i> <input type="checkbox"/> </div> </div> <div style="display: flex; justify-content: space-between;"> <div> <i>Other</i> <input type="checkbox"/> </div> <div> <i>None</i> <input checked="" type="checkbox"/> </div> </div>										
Wind direction & Speed MPH <input type="text" value="1"/> Direction <input type="text" value="SE"/> Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone <input type="text"/> No wind send to Zone 3					<div style="text-align: center;"> <p>0 North</p> <p>Send to Zone 4</p> <p>Send to Zone 1</p> <p>270 West</p> <p>90 East</p> <p>Send to Zone 3</p> <p>Send to Zone 2</p> <p>180 South</p> </div>					
Filled out by: <u>J Kennedy</u>										
Visual check:										

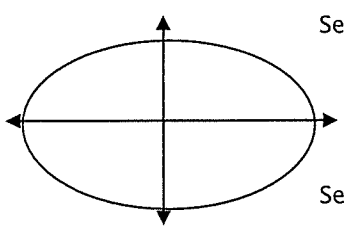
EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 10/24/2008

TIME: 9:48

Revised 7/16/2008

ANSWERED:			
Lab	<input checked="" type="checkbox"/>	Safety	<input checked="" type="checkbox"/>
Guard	<input checked="" type="checkbox"/>		
Name of person calling: <u>Boyd Duncan</u>			
Was 333 called?			
Yes	<input checked="" type="checkbox"/>		
No	<input type="checkbox"/>		
Nature of Emergency:		Release Information: (In Gallons)	
Accident	<input type="checkbox"/>	Amount Spilled	<input type="text" value="unknown"/>
Explosion	<input type="checkbox"/>	Amount Contained	<input type="text" value="unknown"/>
Fire	<input type="checkbox"/>	Amount Not Contained	<input type="text" value="30"/>
Release	<input checked="" type="checkbox"/>		
Detailed Comments: (Be Specific)		A seal blew out of booster pump leaking pond water into containment area. 30 gal. of pond water leaked outside containment.	
Area of emergency: (Be Specific)		Death Row @ phos.	
Nature of Injuries		None <input checked="" type="checkbox"/> Thermal burn <input type="checkbox"/> Laceration <input type="checkbox"/>	
		Fall <input type="checkbox"/> Chem. Burn <input type="checkbox"/> Other <input type="checkbox"/>	
Area affected		Eyes <input type="checkbox"/> Arms <input type="checkbox"/> Back <input type="checkbox"/>	
		Face & Head <input type="checkbox"/> Hands <input type="checkbox"/> Legs <input type="checkbox"/>	
		Neck <input type="checkbox"/> Chest <input type="checkbox"/> Feet <input type="checkbox"/>	
Do we Need?		Ambulance <input type="checkbox"/> Evacuation <input type="checkbox"/> ER Team <input type="checkbox"/>	
		Other <input type="checkbox"/> None <input checked="" type="checkbox"/>	
Wind direction & Speed		<div style="text-align: center;">0 North</div> <div style="text-align: center;">Send to Zone 4 Send to Zone 1</div> <div style="text-align: center;">270 West 90 East</div> <div style="text-align: center;">Send to Zone 3 Send to Zone 2</div> <div style="text-align: center;">180 South</div> 	
Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3			
Filled out by: M. Martinez			
Visual check: No Wind			

NUW 006357

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 10/30/2008

TIME: 12:05

Revised 7/16/2008

ANSWERED:				Lab	<input checked="" type="checkbox"/>	Safety	<input checked="" type="checkbox"/>	Guard	<input checked="" type="checkbox"/>
Name of person calling: <u>Shane Clark</u>									
Was 333 called?									
Yes		<input checked="" type="checkbox"/>							
No		<input type="checkbox"/>							
Nature of Emergency:					Release Information: (In Gallons)				
Accident		<input type="checkbox"/>			Amount Spilled		<input type="text" value="30"/>		
Explosion		<input type="checkbox"/>			Amount Contained		<input type="text"/>		
Fire		<input type="checkbox"/>			Amount Not Contained		<input type="text" value="30"/>		
Release		<input checked="" type="checkbox"/>							
Detailed Comments: <u>Pond water from tk 51 containment</u> (Be Specific)									
Area of emergency: <u>SPA</u> (Be Specific)									
Nature of Injuries				None	<input checked="" type="checkbox"/>	Thermal burn	<input type="checkbox"/>	Laceration	<input type="checkbox"/>
				Fall	<input type="checkbox"/>	Chem. Burn	<input type="checkbox"/>	Other	<input type="checkbox"/>
Area affected				Eyes	<input type="checkbox"/>	Arms	<input type="checkbox"/>	Back	<input type="checkbox"/>
				Face & Head	<input type="checkbox"/>	Hands	<input type="checkbox"/>	Legs	<input type="checkbox"/>
				Neck	<input type="checkbox"/>	Chest	<input type="checkbox"/>	Feet	<input type="checkbox"/>
Do we Need?				Ambulance	<input type="checkbox"/>	Evacuation	<input type="checkbox"/>	ER Team	<input type="checkbox"/>
				Other	<input type="checkbox"/>	None <input checked="" type="checkbox"/>			
Wind direction & Speed				<div style="text-align: center;"> <p>0 North</p> <p>270 West</p> <p>Send to Zone 4</p> <p>Send to Zone 1</p> <p>Send to Zone 2</p> <p>Send to Zone 3</p> <p>180 South</p> </div>					
MPH <input type="text" value="4"/> Direction <input type="text" value="N"/>									
Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3									
Filled out by: <u>J Kennedy</u>									
Visual check:									

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 11/13/2008

TIME: 17:42

Revised 7/16/2008

ANSWERED:		Lab	<input checked="" type="checkbox"/>	Safety	<input type="checkbox"/>	Guard	<input checked="" type="checkbox"/>
Name of person calling: <u>Frank Moore</u>							
Was 333 called?							
Yes		<input checked="" type="checkbox"/>					
No		<input type="checkbox"/>					
Nature of Emergency:				Release Information: (In Gallons)			
				30% Phos Acid			
Accident	<input type="checkbox"/>	Amount Spilled	<input type="text" value="400 gl"/>				
Explosion	<input type="checkbox"/>	Amount Contained	<input type="text" value="400 gl"/>				
Fire	<input type="checkbox"/>	Amount Not Contained	<input type="text"/>				
Release	<input checked="" type="checkbox"/>						
Detailed Comments: 30% Phos Acid overflow tank overflowed into containment. (Be Specific)							
Area of emergency: Phos Acid (Be Specific)							
Nature of Injuries		None	<input checked="" type="checkbox"/>	Thermal burn	<input type="checkbox"/>	Laceration	<input type="checkbox"/>
		Fall	<input type="checkbox"/>	Chem. Burn	<input type="checkbox"/>	Other	<input type="checkbox"/>
Area affected		Eyes	<input type="checkbox"/>	Arms	<input type="checkbox"/>	Back	<input type="checkbox"/>
		Face & Head	<input type="checkbox"/>	Hands	<input type="checkbox"/>	Legs	<input type="checkbox"/>
		Neck	<input type="checkbox"/>	Chest	<input type="checkbox"/>	Feet	<input type="checkbox"/>
Do we Need?		Ambulance	<input type="checkbox"/>	Evacuation	<input type="checkbox"/>	ER Team	<input type="checkbox"/>
		Other	<input type="checkbox"/>	None	<input checked="" type="checkbox"/>		
Wind direction & Speed		<div style="display: flex; justify-content: space-between;"> <div> MPH <input type="text" value="13"/> Direction <input type="text" value="SoEas"/> </div> <div> 0 North 270 West 180 South 90 East </div> </div> <p>Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3</p>					
Filled out by:		Howard Johnson					
Visual check:		SoEast to NoWest					

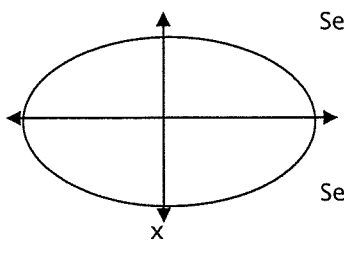
EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 11/19/2008

TIME: 5:11

Revised 7/16/2008

ANSWERED:		Lab	<input checked="" type="checkbox"/>	Safety	<input type="checkbox"/>	Guard	<input checked="" type="checkbox"/>
Name of person calling: <u>Frank Moore</u>							
Was 333 called? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>							
Nature of Emergency: Accident <input type="checkbox"/> Explosion <input type="checkbox"/> Fire <input type="checkbox"/> Release <input checked="" type="checkbox"/>				Release Information: (In Gallons) 30% Phos Acid Amount Spilled <input type="text" value="100"/> gl Amount Contained <input type="text" value="70"/> gl Amount Not Contained <input type="text" value="30"/> gl			
Detailed Comments: (Be Specific)		The over flow pipe on the south 30 clarifier plugged and over flowed into containment. 30 gallons ran on to the road. The acid was neutralized and washed into the ditch.					
Area of emergency: (Be Specific)		East side of Phos Acid					
Nature of Injuries		None	<input checked="" type="checkbox"/>	Thermal burn	<input type="checkbox"/>	Laceration	<input type="checkbox"/>
		Fall	<input type="checkbox"/>	Chem. Burn	<input type="checkbox"/>	Other	<input type="checkbox"/>
Area affected		Eyes	<input type="checkbox"/>	Arms	<input type="checkbox"/>	Back	<input type="checkbox"/>
		Face & Head	<input type="checkbox"/>	Hands	<input type="checkbox"/>	Legs	<input type="checkbox"/>
		Neck	<input type="checkbox"/>	Chest	<input type="checkbox"/>	Feet	<input type="checkbox"/>
Do we Need?		Ambulance	<input type="checkbox"/>	Evacuation	<input type="checkbox"/>	ER Team	<input type="checkbox"/>
		Other	<input type="checkbox"/>	None <input checked="" type="checkbox"/>			
Wind direction & Speed MPH <input type="text" value="2"/> Direction <input checked="" type="checkbox"/> south Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone <input type="text" value="3"/> No wind send to Zone 3		<div style="text-align: center;"> 0 North Send to Zone 4 Send to Zone 1 270 West  Send to Zone 2 Send to Zone 3 180 South </div>					
Filled out by: Howard Johnson							
Visual check: south to north							

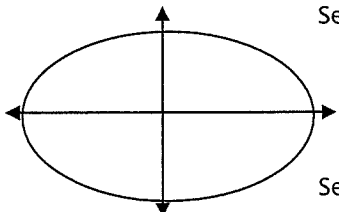
EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 11/19/2008

TIME: 13:00

Revised 7/16/2008

ANSWERED:				<i>Lab</i>	<input checked="" type="checkbox"/>	<i>Safety</i>	<input checked="" type="checkbox"/>	<i>Guard</i>	<input checked="" type="checkbox"/>
Name of person calling: <u>Cody Muir</u>									
Was 333 called?									
Yes		<input checked="" type="checkbox"/>							
No		<input type="checkbox"/>							
Nature of Emergency:					Release Information: (In Gallons)				
Accident		<input type="checkbox"/>		Amount Spilled		<input type="text" value="600"/>			
Explosion		<input type="checkbox"/>		Amount Contained		<input type="text"/>			
Fire		<input type="checkbox"/>		Amount Not Contained		<input type="text" value="600"/>			
Release		<input checked="" type="checkbox"/>							
Detailed Comments: <u>Baro seal tank over flowed spilling app. 600 gallons of pond water.</u> (Be Specific)									
Area of emergency: <u>West side of Filter Building</u> (Be Specific)									
Nature of Injuries									
None		<input checked="" type="checkbox"/>		Thermal burn		<input type="checkbox"/>		Laceration	
Fall		<input type="checkbox"/>		Chem. Burn		<input type="checkbox"/>		Other	
Area affected									
Eyes		<input type="checkbox"/>		Arms		<input type="checkbox"/>		Back	
Face & Head		<input type="checkbox"/>		Hands		<input type="checkbox"/>		Legs	
Neck		<input type="checkbox"/>		Chest		<input type="checkbox"/>		Feet	
Do we Need?									
Ambulance		<input type="checkbox"/>		Evacuation		<input type="checkbox"/>		ER Team	
Other		<input type="checkbox"/>		None		<input checked="" type="checkbox"/>			
Wind direction & Speed				<div style="text-align: center;"><p>0 North</p><p>270 West</p><p>90 East</p><p>180 South</p></div>					
MPH <input type="text" value="7"/>		Direction <input type="text" value="S"/>							
Cross out area that the wind is coming from. This will tell where to send the people to.									
Send to Zone <input type="text"/> No wind send to Zone 3									
Filled out by: <u>Daren Maughan</u>				Send to Zone 4					
Visual check:				Send to Zone 1					
				Send to Zone 2					
				Send to Zone 3					

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 11/21/2008

TIME: 17:10

Revised 7/16/2008

ANSWERED:		<i>Lab</i>	<input checked="" type="checkbox"/>	<i>Safety</i>	<input type="checkbox"/>	<i>Guard</i>	<input checked="" type="checkbox"/>
Name of person calling: <u>Jeff Parker</u>							
Was 333 called?							
Yes		<input checked="" type="checkbox"/>					
No		<input type="checkbox"/>					
Nature of Emergency:				Release Information: (In Gallons)			
Accident	<input type="checkbox"/>	Amount Spilled	<input type="text" value="4 gal"/>				
Explosion	<input type="checkbox"/>	Amount Contained	<input type="text"/>				
Fire	<input type="checkbox"/>	Amount Not Contained	<input type="text" value="4 gal"/>				
Release	<input checked="" type="checkbox"/>						
Area of emergency: (Be Specific) <u>a Flange on the sulfuric line between the 93 tank and the cooler split.</u>							
Area of emergency: (Be Specific) <u>southwest pipe rack headed to east plant</u>							
Nature of Injuries		<i>None</i>	<input checked="" type="checkbox"/>	<i>Thermal burn</i>	<input type="checkbox"/>	<i>Laceration</i>	<input type="checkbox"/>
		<i>Fall</i>	<input type="checkbox"/>	<i>Chem. Burn</i>	<input type="checkbox"/>	<i>Other</i>	<input type="checkbox"/>
Area affected		<i>Eyes</i>	<input type="checkbox"/>	<i>Arms</i>	<input type="checkbox"/>	<i>Back</i>	<input type="checkbox"/>
		<i>Face & Head</i>	<input type="checkbox"/>	<i>Hands</i>	<input type="checkbox"/>	<i>Legs</i>	<input type="checkbox"/>
		<i>Neck</i>	<input type="checkbox"/>	<i>Chest</i>	<input type="checkbox"/>	<i>Feet</i>	<input type="checkbox"/>
Do we Need?		<i>Ambulance</i>	<input type="checkbox"/>	<i>Evacuation</i>	<input type="checkbox"/>	<i>ER Team</i>	<input type="checkbox"/>
		<i>Other</i>	<input type="checkbox"/>	<i>None</i>	<input checked="" type="checkbox"/>		
Wind direction & Speed		<i>MPH</i>	<input type="text" value="2"/>	<i>Direction</i>	<input checked="" type="checkbox"/>	<div style="text-align: center;"><p>0 North</p><p>Send to Zone 4 Send to Zone 1</p><p>270 West 90 East</p><p>Send to Zone 3 Send to Zone 2</p><p>180 South</p></div>	
Cross out area that the wind is coming from. This will tell where to send the people to.							
Send to Zone No wind send to Zone 3							
Filled out by: <u>Tony Wuthrich</u>							
Visual check: <u>yes</u>							

NUW 006362

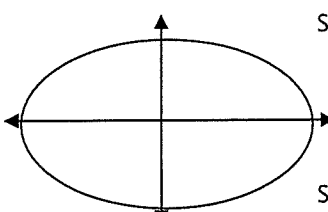
EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 11/23/2008

TIME: 15:30

Revised 7/16/2008

ANSWERED:		Lab	<input checked="" type="checkbox"/>	Safety	<input type="checkbox"/>	Guard	<input checked="" type="checkbox"/>
Name of person calling: <u>Damon Dursteler</u>							
Was 333 called?							
Yes		<input checked="" type="checkbox"/>					
No		<input type="checkbox"/>					
Nature of Emergency:				Release Information: (In Gallons)			
Accident	<input type="checkbox"/>	Amount Spilled	<input type="text" value="30 gal"/>				
Explosion	<input type="checkbox"/>	Amount Contained	<input type="text" value="30 gal"/>				
Fire	<input type="checkbox"/>	Amount Not Contained	<input type="text"/>				
Release	<input checked="" type="checkbox"/>						
Detailed Comments: (Be Specific)		While pumping Sulfuric acid out of containment using a temporary pump we blew an O ring on a hose connection. After shutting down pump we separated hoses to repair O ring and hose drained into roadway. We are applying soda ash to neutralize and cleaning soda ash to containment					
Area of emergency: (Be Specific)		main road to the west of Sulfuric acid containment					
Nature of Injuries		None	<input checked="" type="checkbox"/>	Thermal burn	<input type="checkbox"/>	Laceration	<input type="checkbox"/>
		Fall	<input type="checkbox"/>	Chem. Burn	<input type="checkbox"/>	Other	<input type="checkbox"/>
Area affected		Eyes	<input type="checkbox"/>	Arms	<input type="checkbox"/>	Back	<input type="checkbox"/>
		Face & Head	<input type="checkbox"/>	Hands	<input type="checkbox"/>	Legs	<input type="checkbox"/>
		Neck	<input type="checkbox"/>	Chest	<input type="checkbox"/>	Feet	<input type="checkbox"/>
Do we Need?		Ambulance	<input type="checkbox"/>	Evacuation	<input type="checkbox"/>	ER Team	<input type="checkbox"/>
		Other	<input type="checkbox"/>	None	<input checked="" type="checkbox"/>		
Wind MPH <input type="text" value="e"/> Direction <input type="text" value="e"/>		<div style="text-align: center;">0 North Send to Zone 4 270 West Send to Zone 3 180 South Send to Zone 2 90 East Send to Zone 1</div> 					
Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3							
Filled out by: Tony Wuthrich							
Visual check: east to west							

NUW 006363

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 11/26/2008

TIME: 5:30

Revised 7/16/2008

ANSWERED:		<i>Lab</i>	<input checked="" type="checkbox"/>	<i>Safety</i>	<input type="checkbox"/>	<i>Guard</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Name of person calling: <u>Jim Sippola</u>								
Was 333 called? <div style="display: flex; justify-content: space-between;"> Yes <input checked="" type="checkbox"/> </div> <div style="display: flex; justify-content: space-between;"> No <input type="checkbox"/> </div>								
Nature of Emergency:			Release Information: (In Gallons)					
Accident	<input type="checkbox"/>		Amount Spilled			<input type="text" value="1000"/>		
Explosion	<input type="checkbox"/>		Amount Contained			<input type="text" value="1000"/>		
Fire	<input type="checkbox"/>		Amount Not Contained			<input type="text"/>		
Release	<input checked="" type="checkbox"/>							
Detailed Comments: (Be Specific) 52% acid spill from PPA Evap.								
Area of emergency: (Be Specific) PPA Evap building								
Nature of Injuries			None	<input checked="" type="checkbox"/>	Thermal burn	<input type="checkbox"/>	Laceration	<input type="checkbox"/>
			Fall	<input type="checkbox"/>	Chem. Burn	<input type="checkbox"/>	Other	<input type="checkbox"/>
Area affected			Eyes	<input type="checkbox"/>	Arms	<input type="checkbox"/>	Back	<input type="checkbox"/>
			Face & Head	<input type="checkbox"/>	Hands	<input type="checkbox"/>	Legs	<input type="checkbox"/>
			Neck	<input type="checkbox"/>	Chest	<input type="checkbox"/>	Feet	<input type="checkbox"/>
Do we Need?			Ambulance	<input type="checkbox"/>	Evacuation	<input type="checkbox"/>	ER Team	<input type="checkbox"/>
			Other	<input type="checkbox"/>	None <input checked="" type="checkbox"/>			
Wind direction & Speed MPH <input type="text" value="3"/> Direction <input type="text" value="SE"/> Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone <input type="text"/> No wind send to Zone 3			<div style="display: flex; justify-content: space-between; padding: 0 10px;"> 0 North Send to Zone 1 </div> <div style="text-align: center;"> </div> <div style="display: flex; justify-content: space-between; padding: 0 10px;"> 270 West Send to Zone 3 </div> <div style="display: flex; justify-content: space-between; padding: 0 10px;"> 180 South Send to Zone 2 </div>					
Filled out by: Daren Maughan								
Visual check:								

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 12/3/2008

TIME: 12:07

Revised 7/16/2008

ANSWERED:				<i>Lab</i>	<input checked="" type="checkbox"/>	<i>Safety</i>	<input type="checkbox"/>	<i>Guard</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Name of person calling: <u>Shawn Davis</u>										
Was 333 called? <div style="display: flex; justify-content: space-between;"> <div> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> </div> </div>										
Nature of Emergency:					Release Information: (In Gallons)					
<div style="display: flex;"> <div style="flex: 1;"> Accident <input type="checkbox"/> Explosion <input type="checkbox"/> Fire <input type="checkbox"/> Release <input checked="" type="checkbox"/> </div> <div style="flex: 1; border-left: 1px solid black; padding-left: 10px;"> Amount Spilled 100 Amount Contained 100 Amount Not Contained </div> </div>										
Detailed Comments: <u>A flange was leaking low pH wash water from the Preneut tank.</u> (Be Specific)										
Area of emergency: <u>Preneut tank in Granulation.</u> (Be Specific)										
Nature of Injuries <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> <i>None</i> <input checked="" type="checkbox"/> </div> <div> <i>Thermal burn</i> <input type="checkbox"/> </div> <div> <i>Laceration</i> <input type="checkbox"/> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> <i>Fall</i> <input type="checkbox"/> </div> <div> <i>Chem. Burn</i> <input type="checkbox"/> </div> <div> <i>Other</i> <input type="checkbox"/> </div> </div>										
Area affected <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> <i>Eyes</i> <input type="checkbox"/> </div> <div> <i>Arms</i> <input type="checkbox"/> </div> <div> <i>Back</i> <input type="checkbox"/> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> <i>Face & Head</i> <input type="checkbox"/> </div> <div> <i>Hands</i> <input type="checkbox"/> </div> <div> <i>Legs</i> <input type="checkbox"/> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> <i>Neck</i> <input type="checkbox"/> </div> <div> <i>Chest</i> <input type="checkbox"/> </div> <div> <i>Feet</i> <input type="checkbox"/> </div> </div>										
Do we Need? <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> <i>Ambulance</i> <input type="checkbox"/> </div> <div> <i>Evacuation</i> <input type="checkbox"/> </div> <div> <i>ER Team</i> <input type="checkbox"/> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> <i>Other</i> <input type="checkbox"/> </div> <div> <i>None</i> <input checked="" type="checkbox"/> </div> </div>										
Wind direction & Speed MPH <u>5</u> Direction <u>W</u> Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone No wind send to Zone 3					<div style="text-align: center;"> <p>0 North</p> <p>270 West 90 East</p> <p>Send to Zone 4 Send to Zone 1</p> <p>Send to Zone 3 Send to Zone 2</p> <p>180 South</p> </div>					
Filled out by: <u>Daren Maughan</u>										
Visual check: <u>West to East</u>										

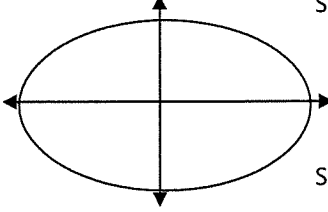
EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 12/7/2008

TIME: 3:10

Revised 7/16/2008

ANSWERED:				<i>Lab</i>	<input checked="" type="checkbox"/>	<i>Safety</i>	<input type="checkbox"/>	<i>Guard</i>	<input checked="" type="checkbox"/>		
Name of person calling: <u>Clare Christensen</u>											
Was 333 called?											
Yes		<input checked="" type="checkbox"/>									
No		<input type="checkbox"/>									
Nature of Emergency:				Release Information: (In Gallons) 400							
				3gal/min							
Accident		<input type="checkbox"/>		Amount Spilled				<input type="checkbox"/>			
Explosion		<input type="checkbox"/>		Amount Contained				400			
Fire		<input type="checkbox"/>		Amount Not Contained				<input type="checkbox"/>			
Release		<input checked="" type="checkbox"/>									
Detailed Comments: <u>Hole in Tk 21</u> (Be Specific)											
Area of emergency: <u>Phos</u> (Be Specific)											
Nature of Injuries											
None		<input checked="" type="checkbox"/>		Thermal burn		<input type="checkbox"/>		Laceration		<input type="checkbox"/>	
Fall		<input type="checkbox"/>		Chem. Burn		<input type="checkbox"/>		Other		<input type="checkbox"/>	
Area affected											
Eyes		<input type="checkbox"/>		Arms		<input type="checkbox"/>		Back		<input type="checkbox"/>	
Face & Head		<input type="checkbox"/>		Hands		<input type="checkbox"/>		Legs		<input type="checkbox"/>	
Neck		<input type="checkbox"/>		Chest		<input type="checkbox"/>		Feet		<input type="checkbox"/>	
Do we Need?											
Ambulance		<input type="checkbox"/>		Evacuation		<input type="checkbox"/>		ER Team		<input type="checkbox"/>	
Other		<input type="checkbox"/>						None		<input checked="" type="checkbox"/>	
Wind direction & Speed				<div style="text-align: center;"><p>0 North</p><p>Send to Zone 4 Send to Zone 1</p><p>270 West 90 East</p><p>Send to Zone 3 Send to Zone 2</p><p>180 South</p></div>							
MPH <u>3</u> Direction <u>SW</u>											
Cross out area that the wind is coming from. This will tell where to send the people to.											
Send to Zone No wind send to Zone 3											
Filled out by: <u>J Kennedy</u>											
Visual check: <u>West to East</u>											

NUW 006366

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 12/12/2008

TIME: 7:29

Revised 7/16/2008

ANSWERED:				<i>Lab</i>	<input checked="" type="checkbox"/>	<i>Safety</i>	<input type="checkbox"/>	<i>Guard</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Name of person calling: <u>Rodger Peck</u>										
Was 333 called? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>										
Nature of Emergency: Accident <input type="checkbox"/> Explosion <input type="checkbox"/> Fire <input type="checkbox"/> Release <input checked="" type="checkbox"/>					Release Information: (In Gallons) 42% Phosphoric Amount Spilled 700 Amount Contained 700 Amount Not Contained <input type="text"/>					
Detailed Comments: (Be Specific)					The pump was isolated and the wash valve was open and the acid exited through the wash valve.					
Area of emergency: (Be Specific)					Phos Acid on the B pump deck					
Nature of Injuries					None	<input checked="" type="checkbox"/>	Thermal burn	<input type="checkbox"/>	Laceration	<input type="checkbox"/>
					Fall	<input type="checkbox"/>	Chem. Burn	<input type="checkbox"/>	Other	<input type="checkbox"/>
Area affected					Eyes	<input type="checkbox"/>	Arms	<input type="checkbox"/>	Back	<input type="checkbox"/>
					Face & Head	<input type="checkbox"/>	Hands	<input type="checkbox"/>	Legs	<input type="checkbox"/>
					Neck	<input type="checkbox"/>	Chest	<input type="checkbox"/>	Feet	<input type="checkbox"/>
Do we Need?					Ambulance	<input type="checkbox"/>	Evacuation	<input type="checkbox"/>	ER Team	<input type="checkbox"/>
					Other	<input type="checkbox"/>	None	<input checked="" type="checkbox"/>		
Wind MPH <input type="text" value="0"/> Direction <input type="text" value="NE"/> direction & Speed Cross out area that the wind is coming from. This will tell where to send the people to. Send to Zone <input type="text" value="3"/> No wind send to Zone 3					<div style="text-align: center;"> <p>0 North</p> <p>Send to Zone 4</p> <p>Send to Zone 1</p> <p>270 West</p> <p>90 East</p> <p>Send to Zone 3</p> <p>Send to Zone 2</p> <p>180 South</p> </div>					
Filled out by: Howard Johnson										
Visual check: No.East to So.West										

EMERGENCY PHONE CHECKLIST

Agrium CPO

DATE: 12/26/2008

TIME: 13:29

Revised 7/16/2008

ANSWERED:		<i>Lab</i> <input checked="" type="checkbox"/>	<i>Safety</i> <input type="checkbox"/>	<i>Guard</i> <input checked="" type="checkbox"/>
Name of person calling: <u>Rodger Peck</u>				
Was 333 called?				
Yes	<input checked="" type="checkbox"/>			
No	<input type="checkbox"/>			
Nature of Emergency:		Release Information: (In Gallons) 52% Phos Acid		
Accident	<input type="checkbox"/>	Amount Spilled	<input type="text" value="500 gl"/>	
Explosion	<input type="checkbox"/>	Amount Contained	<input type="text" value="500 gl"/>	
Fire	<input type="checkbox"/>	Amount Not Contained	<input type="text"/>	
Release	<input checked="" type="checkbox"/>			
Detailed Comments: (Be Specific) <u>The product transfer line on B evap broke spilling 52% acid on the floor in the old Phos building. All acid is in containment.</u>				
Area of emergency: (Be Specific) <u>The old Phos Acid building</u>				
Nature of Injuries				
None	<input checked="" type="checkbox"/>	Thermal burn	<input type="checkbox"/>	Laceration <input type="checkbox"/>
Fall	<input type="checkbox"/>	Chem. Burn	<input type="checkbox"/>	Other <input type="checkbox"/>
Area affected				
Eyes	<input type="checkbox"/>	Arms	<input type="checkbox"/>	Back <input type="checkbox"/>
Face & Head	<input type="checkbox"/>	Hands	<input type="checkbox"/>	Legs <input type="checkbox"/>
Neck	<input type="checkbox"/>	Chest	<input type="checkbox"/>	Feet <input type="checkbox"/>
Do we Need?				
Ambulance	<input type="checkbox"/>	Evacuation	<input type="checkbox"/>	ER Team <input type="checkbox"/>
Other	<input type="checkbox"/>	None	<input checked="" type="checkbox"/>	
Wind direction & Speed		<div style="text-align: center;"> <p>0 North</p> <p>270 West</p> <p>Send to Zone 3</p> <p>180 South</p> </div>		
MPH <input type="text" value="4"/>	Direction <input type="text" value="north"/>			
Cross out area that the wind is coming from. This will tell where to send the people to.				
Send to Zone <input type="text" value="1"/> No wind send to Zone 3				
Filled out by: <u>Howard Johnson</u>				
Visual check: <u>North to South</u>				